

**To: HKFE CLEARING CORPORATION LIMITED (“HKCC”)**

Derivatives Clearing Risk Management

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**REQUEST ON CHANGE OF ADVANCE MARGIN DEPOSIT** <sup>Note 1</sup> **FORM** <sup>Note 2</sup>**1. Particulars of the Participant**

Participant Name :	DCASS Customer Code :
Contact Person Name (Primary) :	Tel. No. :
Contact Person Name (Secondary) :	Tel. No. :

**2. Details of request on change of Advance Margin Deposit**

<i>Please tick the box where appropriate</i>	<b>Amount (HK\$)</b>
<input type="checkbox"/> Deposit <sup>Note 3</sup>	
<input type="checkbox"/> Release to CCMS Collateral Account <sup>Note 4</sup>	

\_\_\_\_\_  
 Authorised Signature(s) of HKCC Participant  
 (with company chop, ONLY applicable if it forms part of your signing instruction)

\_\_\_\_\_  
 Date

Name of Signatory(ies) : \_\_\_\_\_

Note 1: For the purpose of extending the Capital-Based Position Limits in the T+1 Session.

Note 2: The completed form should be received by HKCC no later than 3:00 p.m. for same day effective. Participants should confirm with HKCC after sending out the form to ensure the receipt of the form by HKCC.

Note 3: The requested deposit amount will first be set off by any surplus in the House CCMS Collateral Account; the remaining shortfall (if any) will be collected from the designated bank account via Direct Debit Instruction.

Note 4: The requested amount will be released to the general cash collateral in Participant's House CCMS Collateral Account. Participant is required to input the withdrawal instruction in CCMS by 11:00 a.m. for same day settlement with its designated bank account.

FOR HKCC USE			
VERIFIED/ DATE	APPROVED/ DATE	INPUT/ DATE	CHECKED/ DATE