

**DCASS Production / Testing Line Application
and/or Change of SDNet Bandwidth Notification Form**

To: **HKCC / SEOCH**

From: _____

Tel: 2211 6932

Fax: 2868 0134

Email: clearingpsd@hkex.com.hk

(Full Name of Participant / System Vendor)

DCASS Customer Code:

Contact Person: _____

Tel: _____

Part A: Production Network	
<i>Please tick "✓" in the appropriate box</i>	
<input type="checkbox"/> SEOCH Participant <input type="checkbox"/> HKCC Participant <input type="checkbox"/> Both HKCC & SEOCH Participant	
Items	Details
Service Type :	<input type="checkbox"/> New Installation <input type="checkbox"/> Termination <input type="checkbox"/> Re-configuration <input type="checkbox"/> Change of SDNet Bandwidth <input type="checkbox"/> Change of SDNet Bandwidth + Re-configuration Existing address: _____ _____ New address: _____ _____ <i>(applicable for New Installation or Re-configuration)</i>
Name of Site :	_____ <i>(e.g. site 01)</i>
Owner of SDNet Circuit :	<input type="checkbox"/> Clearing Participant <input type="checkbox"/> Application Service Provider ("ASP")

Part A: Production Network

Please tick "✓" in the appropriate box

SEOCH Participant HKCC Participant Both HKCC & SEOCH Participant

Items	Details
Application Service Provider ("ASP")	<input type="checkbox"/> Name of ASP : _____ HSN / SDNet circuit number : _____
Accredited Vendor of SDNet Circuit	<input type="checkbox"/> HKT <input type="checkbox"/> HKBNES <input type="checkbox"/> HSN by HKEX Hosting Services Ltd
Bandwidth of SDNet^{Note} (not required for HSN)	<input type="checkbox"/> _____ Mbps <input type="checkbox"/> _____ Gbps
Proposed Effective Date (subject to HKEX's confirmation)	

Note:

- Participants are required to inform Clearing Houses for any change of the SDNet bandwidth.
- The minimum requirements for the SDNet bandwidth are as below:

Per Connection	Bandwidth Requirement for DCASS only
For DCASS OAPI connection	3 Mbps
For DCASS Online connection	0.4 Mbps
For Report retrieval solution	1 Mbps

Part B: Testing Line to access DCASS OAPI testing environment	
<input type="checkbox"/> SEOCH Participant <input type="checkbox"/> HKCC Participant <input type="checkbox"/> Both HKCC & SEOCH Participant <input type="checkbox"/> System Vendor	
Items	Details
Service Type :	<input type="checkbox"/> New Installation <input type="checkbox"/> Termination <input type="checkbox"/> Re-configuration Existing address: _____ _____ New address: _____ _____ <i>(applicable for New Installation or Re-configuration)</i>
Name of Site :	_____ (e.g. site 01)
Application Service Provider ("ASP")	<input type="checkbox"/> Name of ASP : _____ HSN / SDNet circuit number : _____
Accredited Vendor of SDNet Circuit	<input type="checkbox"/> HKT <input type="checkbox"/> HKBNES <input type="checkbox"/> HSN by HKEX Hosting Services Ltd
Proposed Effective Date (subject to HKEX's confirmation)	

(S.V.)

Authorized Signature(s)
(with company chop, ONLY applicable if it forms
part of your signing instruction)

Date

(Name of Signatories: _____)