

HONG KONG EXCHANGES AND CLEARING LIMITED
SHARING OF CCASS3 / CCMS TERMINAL TO ACCESS CCASS / CCMS

G-Form 10

To: Clearing Operations – Operations Support & Security Administration, 30/F, One Exchange Square, 8 Connaught Place, Central, Hong Kong.

Date: _____

Group Name : _____

(i) Maintenance request : SHARING OF CCASS3 / CCMS TERMINAL TERMINATE SHARING OF CCASS3 / CCMS TERMINAL
 (select only one category per request form)

(ii) The IP address ranges to be shared / discontinued to be shared from effective date : _____ (DD/MM/YY)

Participant ID or Designated Bank ID that offer(s) the sharing IP address range

(a) _____ All available ranges or Specify IP address range to be shared, fm _____ to _____

(b) _____ All available ranges or Specify IP address range to be shared, fm _____ to _____

(c) _____ All available ranges or Specify IP address range to be shared, fm _____ to _____

(iii) All Participants and sharing parties must sign below to agree the sharing or termination of the above IP address ranges

(a) CCASS/HKCC/SEOCH Participant or CCASS Designated Bank ID: _____

(b) CCASS/HKCC/SEOCH Participant or CCASS Designated Bank ID: _____

For and on behalf of

For and on behalf of

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

Contact Person : _____ **Phone Number** : _____

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

(c) CCASS/HKCC/SEOCH Participant or CCASS Designated Bank ID: _____

For and on behalf of

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

Note: The request for sharing terminals will be treated on a case by case basis and subject to final confirmation by Hong Kong Exchanges and Clearing Limited.

For Office Use only

Signature Verified by	Date	Checked by	Date	Reviewed by	Date	Updated by	Date
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