

**Depository Account Maintenance Notice  
(Physically Settled Metal Futures Contract) for Clearing  
Participants to be registered as Physical Delivery Participant  
defined under Clearing House Procedures**

To: Clearing Participant Admin. & Services  
Clearing Operations  
30/F, One Exchange Square,  
8 Connaught Place, Central,  
Hong Kong

From: \_\_\_\_\_  
\_\_\_\_\_  
(Full Name of Participant)

Fax: 2590 7000  
Email: CDCO\_CAS@hkex.com.hk

DCASS Customer Code: |\_|\_|\_|\_|

Contact Person: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Note: This form has to be submitted by **HKCC Participant** to HKCC at least 5 business days before the last trading day of the relevant spot month Physically Settled Metal Futures Contract for the final settlement purpose.

HKCC Participant's Name: \_\_\_\_\_

HKCC Participant's DCASS Customer Code: |\_|\_|\_|\_|

Delivery Agent's Name (where applicable): \_\_\_\_\_

Delivery Agent's DCASS Customer Code: |\_|\_|\_|\_|

Contact Person for this Form:

Name :	Tel No.:
Email :	Fax No.:

We confirm that we have / our Delivery Agent has (delete as appropriate) maintained depository account(s) with the following Approved Depository. **Information submitted in this Notice supersedes all previous Notice submitted to HKCC before the Date below.**

Approved Depository Name: \_\_\_\_\_  
Depository Account Code: \_\_\_\_\_  
Depository Account Name: \_\_\_\_\_

For General Clearing Participant only (delete below section as appropriate)

We also confirm we offer physical delivery capability to following Non-Clearing Participants ("NCP"):  
(Please list out full name(s) of relevant HKFE Participants where applicable)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

\_\_\_\_\_  
Date

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**Countersigned by Approved Depository**

Note: The following section should be completed by your Approved Depository before submitting to HKCC for processing.

From: \_\_\_\_\_ (Name of Approved Depository)

We confirm that the above-named depository account(s) is/are valid and belongs to the above-named HKCC Participant (Depository Account Name: \_\_\_\_\_).

_____ Authorised Signature(s) (with company chop, ONLY applicable if it forms part of your signing instruction)	_____ Name of Signatory (ies)	_____ Date
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For Office Use Only					
Date Received:	Processed by:	Signature(s) Verified by:	Reviewed by:	Log Updated by: Log Checked by:	Effective Date:
	Date:	Date:	Date:	Date:	