

## Request for the use of SFTP report download service

To: OTC Clear Clearing Operations  
 30/F, One Exchange Square  
 8 Connaught Place  
 Central, Hong Kong

From: \_\_\_\_\_  
 \_\_\_\_\_  
 (Full name of Clearing Member)

Tel: 2211 6508  
 Fax: 2427 1122

OCASS Clearing Member ID: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Please tick “✓” in the appropriate box

### Part I: Basic Information

Account Type (Please check the box)	<input type="checkbox"/> House <input type="checkbox"/> Client
OCASS Client ID (applies if account type is “client”)	

### Part II: Request Type:

<input type="checkbox"/>	Request to activate SFTP report download service
<input type="checkbox"/>	Request to deactivate SFTP report download service

Please send your **public key** to OTC Clear via email [OTC\\_Operations@hkex.com.hk](mailto:OTC_Operations@hkex.com.hk) together with this form.

### Part III: Details of Contact Person for SFTP report download

1.	Name: Mr/Ms _____
	Title: _____
Telephone No.	Office: _____ Email Address: _____
	Mobile: _____
2.	Name: Mr/Ms _____
	Title: _____
Telephone No.	Office: _____ Email Address: _____
	Mobile: _____

# If you required more space, please add additional pages containing the appropriate section, complete and submit it with the form.

**Request for the use of SFTP report download service**

\_\_\_\_\_  
Authorised Signature(s) and Company Chop  
(Name of Signatories: \_\_\_\_\_ )

\_\_\_\_\_  
Date

For Office Use Only				
<b>Date Received:</b>	<b>Processed by:</b>	<b>Reviewed by:</b>	<b>Copy sent to archiving:</b>	<b>Effective Date:</b>
	<b>Date:</b>	<b>Date:</b>	<b>Date:</b>	