

# Application form for IPsx Trading Members

December 2020

# IPsx Trading Member application form

## Introduction

This form should be completed by **Applicants** seeking **Trading Membership on IPSX**.

All Member Firms are bound by the **IPsx Rules** and must ensure compliance with these rules. The Rulebook is available at [www.ipsx.com/rules-and-guidance](http://www.ipsx.com/rules-and-guidance).

## Queries

If you have any queries regarding the completion of this form, please contact:

**IPsx Market Regulation Team**

+44 (0) 20 3931 8800

**[regulation@ipsx.com](mailto:regulation@ipsx.com)**

## Send form to

Scanned copies of the form and supporting documents should be emailed to **[regulation@ipsx.com](mailto:regulation@ipsx.com)**. If there is not enough space for any answer in this form, please complete the answer in a separate document and attach it with this application form.

# IPsx Trading Member application form

Please complete the form using **BLOCK CAPITALS** or typed and all signatures must be original or scanned electronic signatures.

Terms in **bold** in this form have the meaning given to them in the **IPsx Rules**.

## A. Applicant information

Full name of the **Applicant**:

Trading name (if different):

Company Registration:

LEI Code:

Registered office in country of incorporation:

Business address:

**A1.**

Legal status of the **Applicant** (e.g. public limited company, private limited company, limited liability partnership, etc.):

**A2.**

Place and date of company incorporation or formation:

**A3.**

In order to be eligible to become an **IPSO Trading Member** the **Applicant** must be either a **MiFID investment firm** or a **CRD credit institution**. Please provide written confirmation of the **Applicant's** regulated status. Please state the name of the Applicant's Competent Authority and reference number and the capacities in which the Applicant is authorised.

**A4.**

Is the **Applicant** a member of a **designated professional body**?

If yes, please provide details of the relevant body (or bodies) and reference number(s):

**A5.**

Please provide details of all regulated markets the **Applicant** is a member of, and the capacities of those memberships.

**A6.**

Primary contact for the purposes of this application:

**A7.**

If the **Applicant** is a private or unlisted company, please provide names of all the company's directors:

Full name:

Position:

### A8.

If the **Applicant** is a private or unlisted company, please provide names of persons who own or control over 10% of its shares or voting rights:

Full name:	% Shareholdings:	Relationship to the <b>Applicant</b> :
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### A9.

If the **Applicant** is a private or unlisted company, please provide the names of any other persons who otherwise exercises control over the management of the company:

Full name:	Relationship to the <b>Applicant</b> :
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### A10.

Has the **Applicant** previously applied to be an **IPsx Trading Member**?

If yes, please provide details of any previous applications, including the names of the directors/partners responsible for any previous application(s) and dates of submission:

Contact:	Company:	Date:
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**AII.**

- a) Is the **Applicant** either a firm incorporated outside the UK or an individual who is resident outside the UK?
- b) If 'yes', I confirm that the the **Applicant** has appointed an agent for service of process in the UK, as required by the **IPsx Rules**.

Full name of agent:

Please also provide contact details for that agent for service of process in the box below.

## B. Disciplinary History

Please include details of any regulatory intervention, criticism or disciplinary action in relation to the firm or individuals of the firm that will be carrying out or have responsibility of activity on **IPsx**, and/or where relying on membership of a designated professional body, any similar actions taken by that body. This should include the names of the individuals, the type of action, the date of the action and by which regulatory body.



## C. Conflicts of Interest

### C1.

Please confirm that a copy of the **Applicant's** Conflicts of Interest policy is provided alongside this application form:

### C2.

a) Please indicate what other services, if any, does the firm intend to provide on **IPsx**:

**IPsx Approved Valuer**

**IPsx Lead Adviser**

b) If the **Applicant** intends to provide other services on **IPsx**, please outline below how the **Applicant** plans to manage any conflicts of interest that may arise between these functions:

### C3.

a) Is the **Applicant** an investor in, or have any other relationship with IPSX Group Limited?

b) If the **Applicant** has any interest in or relationship with IPSX Group Limited and its subsidiaries (including IPSX Group Limited Directors or other senior management), please outline below how the **Applicant** plans to manage any conflicts of interest that may arise:

#### C4.

If the **Applicant** has identified any other potential conflicts of interest which may arise if it were to become an **IPsx Trading Member**, please state them below. Please also outline how the **Applicant** plans to manage these potential conflicts of interest:

## D. Systems and Controls

### D1.

Confirm your firm has a working knowledge of the **IPsx Rules** as they impact upon **IPsx Trading Members**:

### D2.

Please provide details of the systems the **Applicant** has in place regarding the following:

Order Management:

Quote Management::

Trade Reporting (including ensuring that the correct date/time of trade is reported and cancellation of erroneous **Trade Reports**):

**D3.**

Summarise what training employees engaged, or likely to be engaged, in the use of the IPSX trading platform will receive in respect of **IPsx Rules** and associated procedures:

**D4.**

Confirm the structure of the team which will be involved in using the IPSX trading platform, specifically highlighting reporting lines (a team organogram is acceptable):

**D5.**

How will the **Applicant** monitor compliance with **IPsx Rules** by employees involved in using of the IPSX trading platform?

#### D6.

All **IPsx Trading Members** are obliged to have adequate facilities and procedures to enable them to settle trades in accordance with the **IPsx Rules** and the systems and rules of the relevant settlement system. As such, please provide details of the **Applicant's** settlement arrangements below.

#### E. Staff

Please provide a list of named individuals who will have direct access to the **IPsx** trading platform and their years of relevant experience:

## F. Contact Details

Market Maker/Broker contact:

Compliance contact:

IT/Technical contact:

Finance Department contact:

## G. General Data Protection disclosure

The **Exchange** and the **Applicant** shall comply with the provisions of Appendix 2 of the **IPsx Admission Agreement** (Data Protection).\*

\* [https://www.ipsx.com/media/uploads/documents/IPsx\\_Admission\\_Agreement.pdf](https://www.ipsx.com/media/uploads/documents/IPsx_Admission_Agreement.pdf)

## H. Declaration by Officers of the Applicant

We are authorised to make this application for approval as an **IPsx Trading Member** on behalf of the **Applicant** named in Section A.

We confirm that the **Applicant** is currently of good financial standing and will notify the **Exchange** in the event that it faces material financial difficulties which call into question the continued viability of the **Applicant**

We will notify the **Exchange** immediately of any conflict of interest that may arise and will immediately address with the conflict based on our procedures.

We understand that the **Exchange** may require us to provide further information in order to process our application.

We confirm that the **Applicant** will be bound by the **IPsx Rules**.

We agree to the terms of the **IPsx Admission Agreement**.

We will notify the **Exchange**, as soon as is practicable, of any regulatory intervention, criticism, or disciplinary action in relation to the **Applicant** or individuals of the firm that will be carrying out or have responsibility of activity on **IPsx**, of which the **Exchange** might reasonably expect notice.

This declaration must be signed by two directors of the **Applicant**, or, in the case of a partnership, by two partners.

Full name:

Position:

Signature:

Date:

Full name:

Position:

Signature:

Date:



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