



# Clearing Member Authorisation Form: Authorised Provider Data Access

**Classification: Confidential**

**Member Authorisation Form: Authorised Provider Data Access**

A completed form is required from the Member whenever a Member wishes to delegate a reception of, or access to, LME Clear Data relating to the Member (the **“Member’s LME Clear Data”** to an ISV or other Service Provider (‘‘Authorised Provider’’) acting on its behalf.

This Authorisation Form must be completed and signed by both the Authorised Provider that is to receive the Member’s LME Clear Data and the Member’s Authorised Signatory.

Please return a scanned copy of the completed form to: [LMEclear.operations@lme.com](mailto:LMEclear.operations@lme.com)

Any terms not otherwise defined in this Authorisation Form shall have the meaning given to them under the LME Clear’s Rules and Procedures (the **“Rules”**)

**Clearing Member Details:**

<b>Member Name:</b>		<b>Member Mnemonic:</b>	
<b>Address:</b>			

**Details of Authorised Provider to receive the Member’s LME Clear Data:**

<b>Company Name of Authorised Provider:</b>			
<b>Address:</b>			
<b>Name of contact person:</b>			
<b>Telephone Number:</b>			
<b>Email Address:</b>			
<b>In which environment do you expect the data to be provided?: (tick as appropriate)</b>	<b>Test</b> <input type="checkbox"/>	<b>Production</b> <input type="checkbox"/>	
<b>For which activities will these data be provided: (tick as appropriate)</b>	Real Time Operations <input type="checkbox"/>	Clearing File Receipt <input type="checkbox"/>	
<b>If any of the details provided above change, please complete a new form which shall be duly filled in and signed by the Authorised Provider and the Member’s Authorised Signatory</b>			

We, the Member, hereby authorise the Authorised Provider identified above to receive the Member’s LME Clear Data through the environment and in respect of the activities identified above. We hereby approve the use of the Member’s LME Clear Data by such Authorised Provider for the purpose of providing its services to us in relation to our clearing activities as Member of LME Clear. We shall remain responsible for ensuring compliance by such Authorised Provider with the terms and conditions set out in Rules 2.5 (Confidentiality) and 2.6 (Intellectual Property Rights) of the Rules as if the Authorised Provider were itself the Member, and we shall not be relieved from any of our obligations under the Rules, or otherwise owed to LME Clear under general law. We acknowledge and agree that the terms of the Rules shall remain applicable to us in all respects.

This Authorisation Form replaces and supersedes any Authorisation Forms previously provided by the Member to (under the Member’s Mnemonic stated above) authorising the Authorised Provider to receive its data in respect of its clearing activities with LME Clear.

This authorisation shall remain in full force and effect until it is revoked by written notice from the Member to LME Clear.

**Approved and Signed by the Member’s Authorised Signatory:**

<b>Name of Member :</b>			
<b>Member Mnemonic:</b>			
<b>Name of Authorised Signatory:</b>			
<b>Position / Title :</b>			
<b>Signature:</b>		<b>Date:</b>	

**Signed by Authorised Provider Signatory**

<b>Name of Authorised Provider:</b>			
<b>Name of Signatory:</b>			
<b>Position / Title :</b>			
<b>Signature:</b>		<b>Date:</b>	

**LME Clear use only:**

<b>Authorised Provider - FSMD User ID:</b>			
<b>Authorised Provider - FSMEM User ID:</b>			
<b>Completed By:</b>		<b>Date Completed:</b>	