

ICM Client confirmation with respect to the Interim Participation Conditions (Authorised Manager)



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*Company name (Authorised Manager)	
_____	_____
*Address 1	*Street no.

*Address 2	
_____	_____
*Postal code	*Town/city

*Country	

*First name/surname (Contact person)	
_____	_____
*Phone	*Fax

*E-mail	

* Member ID of the Authorised Manager

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ICM Client confirmation with respect to the Interim Participation Conditions

We hereby make the following confirmations with respect to the following Interim Participation Conditions for each of the Relevant Funds, Relevant Fund Segments, Incorporated Funds and/or legal entities, as listed in the Annex to this notice, for which we act as Authorised Manager:

- (1) We confirm that we are neither illiquid nor impending illiquid (*(drohend) zahlungsunfähig*) and that no petition for the commencement of insolvency proceedings with regard to our assets or any similar petition has been filed (Chapter I Part 3 Subpart A Number 11.3.2 (2) of the Clearing Conditions of Eurex Clearing AG (Clearing Conditions)).
- (2) If the Individual Clearing Model Conditions under Client Clearing Documentation (ICM-CCD) have been selected as the documentation standard, we confirm that the corresponding Client Clearing Agreement with _____ meets the requirements of an Eligible Client Clearing Agreement (Chapter I Part 3 Subpart A Number 11.3.2 (3) of the Clearing Conditions).
- (3) We confirm that we have access to the systems of Eurex Clearing AG and that all functions in the context of the Covered Transactions can be performed (Chapter I Part 3 Subpart A Number 11.3.2 (5) of the Clearing Conditions).

This includes access to:

- EurexOTC Clear GUI and the Common Report Engine: applicable for DC With System Access (OTC IRS only)
- Eurex Clearing GUI (@-Xtract) and C7 Derivatives Clearing GUI and the Common Report Engine: applicable for DC With System Access (Eurex transactions) and for DC Market Participants (Eurex Transactions)

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- (4) We furthermore confirm that no event has occurred with respect to us that would constitute a Termination Event pursuant to Chapter I Part 1 Number 7.2.1 (1) to (11) of the Clearing Conditions or an Insolvency Termination Event pursuant to Chapter I Part 1 Number 7.2.2 of the Clearing Conditions (Chapter I Part 3 Subpart A Number 11.3.7 of the Clearing Conditions).

Capitalised terms used in this confirmation but not defined herein have the same meaning given to them in the Clearing Conditions.

Name of the Authorised Manager

Signature

Signature

Place / Date

Place / Date

Name

Name

Function

Function

