

Membership Application Form

Thank you for your interest in Membership of Dubai Gold and Commodities Exchange DMCC ("DGCX" "the Exchange"). We seek your understanding on the following while completing the Application:

- Please complete the Application and all annexures in English. This applies to the supporting documents accompanying your submission.
- All information is required, unless expressly indicated as optional.
- Please use additional sheets or appendices to furnish information, wherever necessary.
- Original signed copy of the Application form, annexures and other relevant documents, as applicable, must be sent to:

Membership Department Dubai Gold and Commodities Exchange

Jumeirah Lakes Towers (JLT), Gold Tower (AU), Level UP (Floor 37), P.O. Box 37736, Dubai, UAE Tel: +9714 361 1636 / 1644, Fax: +9714 361 1617 Email: membership@dgcx.ae www.dgcx.ae

1. Application for Membership

Plea	se indicate the type of Membe	ership the Applicant intends to engag	e as a DGCX Member.
-	Broker Membership Trade Membership		
2. (Clearing Membership		
	s the Applicant intend to apober? YES NO	ply to Dubai Commodities Clearing	Corporation (DCCC) to be a Clearing
If ye	s, please indicate the type of l	Membership the Applicant intends to	engage as a DCCC Member.
- -	Direct Clearing Membership	(DGCX Trade Members only) (DGCX Broker Members only) ip (DGCX Broker Members only)	



3. Details of Applicant

-	Full Legal Entity Name:			
-	Entity Legal Type			
-	Registration Number:			
-	Licensing Authority:			
-	Date of Incorporation:			
-	Country of Incorporation:			
-	Registered Office Address:			
-	P. O Box/Postal Code:		City:	
-	Telephone Number:		Fax Number:	
-	Mailing Address (If different	to that of Registered Office):		
-	P. O Box/Postal Code:		City:	
-	E-mail Address:		Website:	
-	Contact persons:			
	Full Name:			
	Designation:			
	Direct Phone No.:		Mobile No.:	
	Email:			
	Second Contact: (if any)			
	Full Name:			
	Designation:			
	Direct Phone No.:		Mobile No.:	
	Email:			
4.	Branch & Representati	ve Office		
Doe	es the Applicant have a bran	ch or representative office in the U	AE?	
If ye	es, please provide all the rele	evant details:		
-	Name of the Branch or Re	presentative Office:		
-	Address:			
-	P. O Box/Postal Code:		City:	
-	Contact persons:			
	Full Name:			
	Designation:		⊏ mail.	
	Direct phone no.:		E-mail:	



5. Description of Applicant's Business						
Brokerage Commodities Trading		anking earing		Manufacturing Currency Exchange	e House	
Other (Please specify)						
Countries from which the Ap	plicant will	conduct bus	iness on D	GCX:		
6. Ownership and Mana						
Please complete the informat	ion below	and fill Annex	A for eac	h person.		
a. Shareholders Details	:	_				
Full Name		Sharehol	ding%	Nationality		Address
**If the shareholder is an enti	ty, please	orovide copy	of its trade	e license / Certificate	of Incorpo	oration / MOA.
b. Ultimate Beneficial O	wners (U	BO) Details	:			
Full Name		Sharehol	ding%	Nationality		Address
**Ultimate Beneficial Owner is or more of the Applicant firm				•	•	• •



c. Directors Details	\$:
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Full Name	Date of appointment (dd/mm/yyyy)	Nationality	Address

{i.e. are/were they – a seni	or military, government	Politically Exposed Person? or political official of any country? A senior number or close associate of such a persor	executive of a
Yes □	No □	Not Sure □	
If 'YES' or 'NOT SURE' pleas	se provide below any kn	own details:	

7. Membership of Other Exchanges

Please provide details of memberships of other derivatives or securities exchanges held by the Applicant or its related parties.

Name of Exchange	Type of Membership	Date of Membership



8. Membership of Trade Associations

Please provide details of membership of trade associations held by the Applicant or by a party related to the Applicant.

Name of the Trade Association	Name of Member	Member Since (Date)

9. Business Plan

Please attach a business plan which should include the experience of the Applicant's directors & management, the nature of the Business and the intended purpose that membership is being sought, and the contribution that the Applicant proposes to make to DGCX.

10. Financial Details

Paid Up Capital:	
Estimated Annual Income:	
Financial year followed by the Applicant:	

11. Source of Funds

Please provide details on the source of funds that will be invested in DGCX



12. Bank Details

Ple	esse provide details of ha	nk account(s) held by the Ap	onlicant		
1 10	ase provide details of bal	1	2	3	
N	ame of Bank:				
F	ull Address:				
A	ccount Number:				
A	ccount Type:				
0	perational Since (date):				
	. Statutory Regulator		regulatory authority in relati	on to derivatives or	
	curities markets? YES □ NO □	iary neeriess by a statutory,	rogalatory administry in rolati	on to domainos of	
If y	es, please provide all the	relevant details:			
14	. Fit & Proper Questi	onnaire			
	• •	s" to any of the questions in necessary, attach separate	this section, please provide documentation.	details in the textbo	ox at the
a.			sidiaries, director or key which final decisions we		YES 🗆
			itside United Arab Emirates	•	NO 🗆
b.	• • • • • • • • • • • • • • • • • • • •		ries, director or key staff be t of any investigation, revie		YES 🗆
	procedure by any regu	llatory authority, profession regulated exchange, clearing	nal body, financial services ng house, government body	regulator, self-	NO □
c.	Has the Applicant, any o	of its shareholders, subsidia	ries, director or key staff be	en refused, or had	YES [



		striction placed on, the right to carry on a trade, business, or profession requiring a license, tration, or other permission in the last 10 years?	NO 🗆
		the Applicant, or any of its subsidiaries, shareholders, directors or key staff been or is unable	YES 🗆
	equiv	Ifil any of his financial obligations, or gone into insolvency, liquidation, administration or the valent proceedings, or been subject to a judgment debt or declared a bankruptcy in the last ears in the UAE or elsewhere?	NO □
		any commodity exchange, securities exchange, clearing organization or other self-regulatory ever fined, suspended, conditioned, denied or revoked privileges of the Applicant, or any of	YES □
		ubsidiaries, shareholders, directors or key staff?	NO □
		e Applicant's entity, any of its shareholders, subsidiaries, director or key staff partner in	YES 🗆
	anoth	her Brokerage Firm?	NO 🗆
15.	Red	quired Supporting Documents	
		be sure to include all of the items listed below with your initial application submission in order on review process to begin promptly. Failure to include all items listed may result in processing	
		ons are deemed confidential and handled in a secure environment. Applicants should be prepared to the reasonable information with respect to this Application as DGCX may require.	pared to
		A notarised and attested copy of the Memorandum and Articles of Association.	
]	A notarised and attested copy of a valid Trade License or Certificate of Good Standir Certificate of Incorporation, approved by the concerned authorities.	ng, and
]	Partners/board of directors' resolution seeking Membership of DGCX.	
]	Partners/board of directors' resolution for appointment of directors.	

Completed ownership structure on the entity letterhead, signed by entity's authorised signatory.

Official Companies Profiles, etc) which proof the Ultimate Beneficial Owner(s).

Copy of official documents (MOAs, AOAs, Share Certificate, Authorities Extract, Trade Licenses,

A certified true copy of the passports for shareholder, directors, ultimate beneficial owners, authorized

signatory, and key staff.



Annexure A - Biodata of Directors, Shareholders, Compliance Officer, authorized signatories.
Annexure B – Bank Reference Letter.
Annexure C – Audited Net Current Tangible Assets (NCTA) Certified by External Auditor.
Annexure D - List of Authorized Signatories.
Completed organisation structure on the entity letterhead, signed by entity's authorised signatory.
Business plan describing the experience of the Applicant's directors & management, the nature of business and the intended purpose reasons that membership is being sought, and the contribution that the Applicant aims to make to DGCX.
Copy of the latest audited financial statement.
Proof of registered address and operating address of the entity (Utility Bill, Tenancy Contract, etc.).
CRS/ FATCA Form.
Copy of the original power of attorney (if applicable).
Exchange Undertaking.
Copy of Tax Registration Certificate
Application Fee of \$US 1,000* (non-refundable).
Membership admission fee (\$US 75,000* for Broker Membership - \$US 30,000* for Trade Membership).

*Applicable VAT amount to be added for UAE based entities

16. Applicant Declaration

- 1. I declare that, to the best of my knowledge and belief, having made all due enquiry, the information given in this form, and in the documents attached is complete and correct. I understand that misleading or attempting to mislead the Exchange during the application process will be deemed an act of misconduct and may render the Applicant liable to disciplinary proceedings
- 2. I hereby undertake to notify the Exchange in writing of any other information which is relevant to the Application and will immediately notify the Exchange of any significant changes in the information provided in this Application form which occur after the date of submission of the Application.
- 3. We acknowledge that any misrepresentation or withholding of facts in connection with this Application for membership or breach of any undertaking or condition of admission to membership may result in rejection of our application or termination of the membership. We hereby state that the above is correct and complete to the best of our knowledge.
- 4. I declare, to the best of my knowledge and belief, having made all due enquiry, that the Applicant's Key staff, directors, and the proposed Board members are fit and proper to perform the functions for which they are proposed.
- 5. I declare my understanding that the DGCX may request more detailed information (including but not limited to, personal, educational, employment and financial information) should it be deemed necessary to



adequately assess the fitness and propriety of the firm or any person connected to the firm.

- 6. We hereby apply for Broker Membership/ Trade Membership of DGCX. We confirm that we have read and understood the DGCX By-laws and Clearing Rules of DCCC, and agree to comply with and be bound by the DGCX By-Laws and Clearing Rules of DCCC in its current form and as amended from time to time, and to pay fees as the Exchange may determine from time to time.
- 7. I understand that any personal data provided to the DGCX will be used to discharge its regulatory functions under the DGCX By-Laws and the rules of DCCC.

17. Tax Declaration

I. For Applicants based in the United Arab Emira	ates
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We,
hereby confirm that:

The Value Added Tax Number related to our firm as issued by the Federal Tax Authority of United Arab
Emirates, is:

The address of our office/permanent Establishment/branch in the UAE is:

- We will inform DGCX in case of any change in the information provided in this declaration.

II. For Applicants based outside the United Arab Emirates:

We, hereby confirm that

we do not have either of the following:

- a) Value Added Tax No. issued from the Federal Tax Authority of United Arab Emirates,
- b) Address of any office/permanent Establishment/branch in the UAE.
- We will inform DGCX in case of any change in the information provided in this declaration.

-OR-

We, hereby confirm that:

- The Value Added Tax Number related to our firm as issued by the Federal Tax Authority of United Arab Emirates, is:
- The address of our office/permanent Establishment/branch in the UAE is:
- We will inform DGCX in case of any change in the information provided in this declaration.



18. Signature

I confirm that I have the authority to make this Application, to declare as specified above and sign this form for, or on behalf of, the Applicant.

Name of the Applicant	
Names of the Authorized Signatory(ies):	
Designation of the Signatory(ies):	
Signature(s):	
Date:	

**Note: Authorized signatory as authorized by the Shareholders or Board of Directors to sign the Application form.

19. Application Fee / Admission Fee

A non-refundable Application fee of USD 1000 (Applicable VAT amount to be added for UAE based entities) must accompany the Application. The Application must also be accompanied with the applicable membership fee; which will be returned in full if the Application is not approved. Requests for refund of membership fees deposited may be considered for refund at the Exchange's discretion whilst the Application is in progress. Please note that fees paid become non-refundable once an application is approved for membership.

Payments may be made through telegraphic transfer to any of the DGCX bank accounts as per details given below:

Dubai Gold and Commodities Exchange DMCC A/C No: 1 0 2 2 2 4 4 8 0 8 1 0 1 IBAN No: AE700260001022244808101

SWIFT CODE: EBILAEAD BANK: Emirates NBD

Please provide payment details of the telegraphic transfer affected:

i loado provido paymont a	iotalio di trio torograprilo tranoror anottoa.
Amount Paid:	
Name of Bank:	
Reference Number:	

Please forward the SWIFT copy to the DGCX Membership Department at membership@dgcx.ae For any further clarifications, please write or call the DGCX Membership Department

Membership Department Dubai Gold and Commodities Exchange

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