

# Annex 1 – Application form

## Qualification process to become common depository and/or common service provider and/or common safekeeper First stage process: pre-qualification

Applications, to be printed on letterhead paper, have to be sent to each ICSD by 24th of May 18:00 CET :

- via registered mail/DHL to the below addresses and individuals

Clearstream Banking S.A.  
Attn : Mrs Françoise Pihoué  
42, Avenue JF Kennedy  
L-1855 Luxembourg

Euroclear Bank SA/NV  
Attn : Mrs Marta Moura  
1, Boulevard du Roi Albert II  
B-1210 Brussels

and

- via e-mail containing a scanned copy of the signed version and electronic PDF fillable version and any supporting material to:  
**2019CDQualification@clearstream.com and 2019\_CDqualification@euroclear.com**

### Entity information ('the entity')

Name of the entity:

Registered address of the entity:

### Contact information

Name of contact person:

Title of contact person:

e-mail address:

Telephone:

### Applies as (tick one or more)

☐

Common Depository (CD)

☐

Common Safekeeper (CSK)

☐

Common Service Provider (CSP)

Legal status <sup>(1)</sup>:

<sup>(1)</sup> If the legal structure is a Subsidiary, please provide below the name and registered address of parent company.

Name of parent company:

Registered address  
of parent company:

### Corporate documents of the applicant required to support the application – Please attach the following documents (in English):

- Articles of association;
- Banking/Financial institution licence;
- Extract of company registrar or certificate of incorporation;
- Shareholder structure; and
- Composition of Board of directors.

**Applicants are required to provide their answers relating to the below pre-qualification criteria**

**Compliance**

1. We confirm that the country of incorporation of the Entity is not a country under any embargo/sanction and is not subject to a call for action from the Financial Action Task Force (FATF) in the context of the fight against money laundering and terrorism financing.  
☐ Yes, confirmed ☐ No
2. We confirm that neither the Entity nor any of its controlling shareholders or beneficial owners, in the sense of the European Union 4th Anti Money Laundering (AML) Directive whether intermediate or ultimate is designated under or subject to any economic sanctions laws, regulations or other instruments including but not limited to any sectoral specific restrictions.  
☐ Yes, confirmed ☐ No
3. We confirm that no director or board member of the Entity is subject to any economic sanctions laws, regulations or other instruments including but not limited to travel bans.  
☐ Yes, confirmed ☐ No
4. We confirm that the Entity has adopted an Anti Money Laundering / Counter Terrorist Financing framework and policies consistent with the Wolfsberg Correspondent Banking Principles and the ISSA (International Securities Services Association) Financial Crime Compliance Principles.  
☐ Yes, confirmed ☐ No
5. We confirm that the Entity has adopted a compliance framework that includes at a minimum Anti-Bribery and Corruption, Insider Trading and Market Abuse, Conflicts of Interest, the Prevention of Fraud, and the Prevention of Tax Offences.  
☐ Yes, confirmed ☐ No
6. We confirm that the entity has a framework / policies, organizational and security measures compliant with the EU General Data Protection Regulation (or equivalent).  
☐ Yes, confirmed ☐ No

**Regulation**

7. We confirm the Entity is a credit institution authorised and supervised in accordance with Directive 2013/36/EU and Regulation (EU) No 575/2013 or a third country financial institution that is subject to regulatory and supervisory arrangements at least equivalent to those applied in the European Union.  
☐ Yes, confirmed ☐ No

The Entity is supervised by the following authorities:

## Financial strength

8. The Entity's insurance type and coverage is as follows.

9. We confirm that the entity complies with minimum capital adequacy ratio of 10.5 % (including the capital conservation buffer).

☐ Yes, confirmed ☐ No

10. We confirm that the Entity has a minimum credit rating of BBB-(from Standard & Poor's) and/or Baa3 (from Fitch and Moody's). When the Entity is a subsidiary and does not meet the above criteria on its own, a guarantee will be required from the parent company. In this case, the Entity should confirm the credit ratings of the parent company.

☐ Yes, confirmed ☐ No

*Name of the parent company:  
(if applicable)*

*Registered address of the parent  
company:  
(if applicable)*

*Credit ratings of parent company:  
(if applicable)*

In addition to the external rating of the Entity, each ICSD will carry out its own internal credit assessment. The Entity should be considered of low credit risk according to the internal rating system of each ICSD.

## Service Capabilities

11. We confirm that the Entity has secured physical vaults. Please indicate below the geographical location of the vaults.

☐ Yes, confirmed ☐ No

Location of vaults (full address):

12. The Entity describes its experience in corporate trust, paying agency, safekeeping & settlement or shows operational synergies and experience in working with independent issuer agency business.

*The applicant is free to attach to this application any additional document related to this question. Please list the attachments:*

13. We confirm that the Entity;

- 1) adheres to SWIFT ISO standards; and

☐ Yes, confirmed      ☐ No

- 2) has a Customer Security Programme self-attestation which attests compliance with all mandatory controls

☐ Yes, confirmed      ☐ No

14. The Entity provides information which demonstrates that it has a robust accounting system & adequate internal controls

*The applicant is free to attach to this application any additional document related to this question. Please list the attachments:*

**Business continuity and resilience**

15. The Entity provides information regarding its

a) business resilience & continuity plan;

*The applicant is free to attach to this application any additional document related to this question. Please list the attachments:*

**and**

b) its recovery plan.

*The applicant is free to attach to this application any additional document related to this question. Please list the attachments:*

The information provided in this application form and in supporting materials is true, accurate and complete.  
The Entity shall inform the ICSDs as soon as possible during this qualification process  
of any material change to information provided in this application after the date below.

*Place, Date:*

*Name of Entity:*

*Name of authorised signatory:*

*Title of authorised signatory:*

*Authorised signature:*

*Name of authorised signatory:*

*Title of authorised signatory:*

*Authorised signature:*