1. **Primary Contact of Applicant-Firm:**

   Name: Title:

   Telephone: Email: CRD#:

2. **Applicant-Firm:**

3. **Applicant-Firm Business Address:**

   Street:

   City: State: Zip Code:

4. **Applicant-Firm's CRD#:**

5. **Provide the number of permits in each category for which the Applicant-Firm is applying.**

   Floor Broker   Floor Broker Alternate

   Floor Market Maker   Floor Market Maker Alternate   Clerk

6. **Applicant-Firm Authorized Personnel**

   The Applicant-Firm must provide a list of all authorized personnel on the Trading Floor via the attached form (see next page).

7. **Insurance**

   The Applicant-Firm must submit a certificate of insurance as provided in Rule 527(d).

8. **Authorization**

   The undersigned agrees that he/she is authorized on behalf of Applicant-Firm to make this application to the Exchange.

   The undersigned hereby agrees that the Applicant-Firm will abide by the Bylaws and Rules of the Exchange as they shall be amended from time to time.

   The undersigned represents that, to the best of my knowledge and belief, the foregoing statements are true and correct.

   The undersigned recognizes that Applicant-Firm may be the subject of an investigative consumer report ordered by the Exchange, and hereby authorizes and consents to the Exchange obtaining such report.

Signature of Authorized Officer: Date:

Name (Printed):   Title:

Authorized Trading Floor Personnel

It is the Applicant-Firm's responsibility to notify the Exchange's Membership Department of changes to Authorized Trading Floor Personnel, including additions and terminations. Permit Type (i.e., Floor Broker or Floor Broker Alternate, Floor Market Maker or Floor Market Maker Alternate or Clerk)

1. Name:
    Permit Type:
    Telephone:
    Email:
    CRD#:
    Securities Trader (S-57) Registration:　Yes　　No

2. Name:
    Permit Type:
    Telephone:
    Email:
    CRD#:
    Securities Trader (S-57) Registration:　Yes　　No

3. Name:
    Permit Type:
    Telephone:
    Email:
    CRD#:
    Securities Trader (S-57) Registration:　Yes　　No

4. Name:
    Permit Type:
    Telephone:
    Email:
    CRD#:
    Securities Trader (S-57) Registration:　Yes　　No

5. Name:
    Permit Type:
    Telephone:
    Email:
    CRD#:
    Securities Trader (S-57) Registration:　Yes　　No

Exchange Membership Department (Only)
Approved:
Date:
Name (Printed):
Title: