# Appendix 13 – Designated Market Maker Application

Completing this application

This form must be completed by an entity that is seeking accreditation as a Designated Market Maker in specific Securities quoted on a market provided by NZX. Please read and follow all instructions.

If the entity seeking accreditation is an NZX Trading Participant, please complete sections 1 and 3.

If the entity seeking accreditation is not an NZX Trading Participant, please complete all sections.

If you need assistance with your application, please contact NZX Participant Compliance on compliance@nzx.com or +64 4 498 2279.

All information provided to NZX in relation to this application will be kept confidential, except to the extent that disclosure of any or all of the information provided is necessary for the exercise of NZX’s regulatory functions, or as required by law.

NZX reserves the right to decline an application even if it meets the prescribed minimum criteria.

Completed application forms (together with any supporting information) should be emailed to compliance@nzx.com or uploaded to the NZX Participant reporting platform.

NZX reserves the right to decline an application notwithstanding that an applicant meets the prescribed minimum criteria.

Checklist

Please ensure that the following documentation and information has been provided:

Application form has been completed and the undertaking signed by two Authorised Signatories

 A copy of the Applicant’s Market Making Agreement

 In the case that an Applicant is not an NZX Trading Participant, a copy of the Applicant’s DMA Agreement

 Any other relevant information in relation to this application

1. Applicant Details

**Name of Applicant** *State the name of the entity that is applying to become a Designated Market Maker*

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**Name, position and contact details of main contact person for the Applicant to discuss this application**

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**NZX Listed Security or Securities**

*Please provide details of the NZX listed Securities that the Applicant is seeking to make markets in*

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**Conflict management arrangements**

*Please provide details of the Applicants conflicts management processes and procedures, including controls in place to:*

* *manage confidential information regarding client trading activity; and*
* *ensure employees responsible for conducting market making activity do not have visibility over or access to client trading information in the Securities the Applicant is seeking to make markets in.*

*Please also provide details of the associated oversight and monitoring arrangements the Applicant has in place in relation to these controls.*

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1. Additional details where Applicant is not an NZX Trading Participant

**Trading name (if different to Applicant name provided above):**

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**Applicant’s address and contact details**

*Details of the address and contact telephone numbers of the Applicant’s principal place of Broking Business (Principal Broking Office) and registered office, if different*

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**Name, position and contact details of Market Making Representative**

*As required under Participant Rule 16.5*

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**Name of Trading Participant that will be providing Direct Market Access and a copy of the relevant Agreement**

*As required under Participant Rule 16.2.1*

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1. Undertaking by Applicant to NZX

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* carry out its responsibilities as a Market Maker honestly and diligently;
* comply with the applicable NZX Participant Rules, any directions given from time to time by NZX that are applicable to Market Makers, and at all times observe Good Broking Practice;
* ensure that all of its Employees carrying out market making activity are competent and comply fully with all applicable NZX Participant Rules, any direction given from time to time by NZX, and at all times observe Good Broking Practice;
* pay all fees, levies or other charges as set from time to time by NZX;
* buy and sell the Security(ies) for which the Applicant is accredited as a Designated Market Maker on its own account and on a continuous basis;
* enter and maintain Bids and Offers in the Security(ies) for which the Applicant is accredited as a Designated Market Maker during the hours specified in its Market Making Agreement;
* satisfy Orders delivered to the Applicant’s posted quotes;
* enter quotations into the Trading System for the Security(ies) the Applicant is accredited as a Designated Market Maker within the guidelines on the maximum allowable Spread as set out in the Market Making Agreement and/or advised by NZX from time to time;
* adjust and reinstate the two-sided quotations for the Security(ies) for which the Applicant is accredited as a Designated Market Maker within the period specified in its Market Making Agreement following an executed Trade;
* separate the Applicant’s activities as a Designated Market Maker from its other business activities;
* use the NZX approved facilities to undertake its activities as a Designated Market Maker in the Security(ies) for which the Applicant is accredited as a Designated Market Maker; and
* adhere to any other condition imposed from time to time by NZX as a requirement of accreditation as a Designated Market Maker.

The Applicant confirms that:

* all the information contained in this application and otherwise supplied is complete, true, accurate and not misleading;
* it has read the NZX Participant Rules and believes that this application conforms to the criteria (except as specifically notified with this application) for accreditation as a Designated Market Maker as set out in those Rules; and
* neither the Applicant nor any of the personnel named in this application have been subject to any disciplinary action by a regulator or law enforcement agency in the context of financial services or corporate finance and save as set out in this application, have not been disqualified by a court from acting as a director of any body corporate or from acting in the management or conduct of its affairs

**Signature of two Authorised Signatories**:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Full name of Signatory

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Full name of Signatory

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_