

# ClearPar

## User Details

Company Name \_\_\_\_\_

Entity Name \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Region \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-Mail Address \_\_\_\_\_

External User ID\* \_\_\_\_\_

## Authorised Roles

\*optional

<input type="checkbox"/> Reviewer	Custodian/Trustee	<input type="checkbox"/> Borrower
<input type="checkbox"/> Signatory	Fund Administrator	<input type="checkbox"/> Operations Contact
<input type="checkbox"/> Agent Bank	Security Agent	<input type="checkbox"/> Legal Counsel

DC Override Approver (LSTA Secondary trades only)

## Activity Rights

Document Type	Review	Sign
Trade Confirm	<input type="checkbox"/>	<input type="checkbox"/>
AA / Transfer Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Funding Memo / Pricing Letter	<input type="checkbox"/>	<input type="checkbox"/>
PSA (LSTA only)	<input type="checkbox"/>	<input type="checkbox"/>
MultiLat	<input type="checkbox"/>	<input type="checkbox"/>
Net Off	<input type="checkbox"/>	<input type="checkbox"/>

"I confirm that I am authorized to append my signature, by electronic means, to documents and otherwise on the ClearPar platform, with the effect that the electronic signature shall bind the legal entity on behalf of which I am appending my signature and that this electronic signature is valid and binding."

**Specimen Signature**  
*(online signing only)*

**Signing Title**

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**"Primary Contact" approval will be sourced before User access can be granted**

Please email this form to [clearparsupport@markit.com](mailto:clearparsupport@markit.com)

For further assistance please call +001 646 690 4288 (US) or +44 203 367 0400 (UK)