

Nepal Derivative Exchange Limited

CHANGE IN DESIGNATED PARTNER PARTNERSHIP FIRM / LIMITED LIABILITY PARTNERSHIP

CHECKLIST

Sr.No	Annexure	Particulars	Compliance (Yes /No)
1.	B1	Application for change in Designated Partner	
2.	B2	Authorization Letter of Designated Partner	
3	B3	Details of partners (After change)	
4.	B4	No other membership Undertaking (for newly appointed designated partner)	
5.	B5	Declaration by designated partner	
6.	B6	Undertaking by designated partner	
7.	B7	Undertaking for no change in control	
8.		Certified true copy of PAN Card of the incoming designated partner	
9.		Bio-data of incoming designated partner with complete details of Education & Experience and Residence proof of incoming designated partner.	
10	B8	Existing Sharing pattern Note: If there is any change in sharing pattern due to change in Designated Partner, the Member is required to apply for prior approval of the Exchange & is required to submit documents for change in sharing pattern.	
11		Existing DPG details	

Please feel free to call /write to us for queries, if any:

Membership Department

Nepal Derivative Exchange Ltd.

NDEX Complex, Subidhanagar, Tinkune

Kathmandu-35, Nepal

Email: membership@ndex.com.np

Website: <http://www.ndex.com.np/>

**APPLICATION FOR CHANGE IN DESIGNATED PARTNER
(On the letterhead of the Member)**

Date:

To,
Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal
Email: membership@ndex.com.np
Website: <http://www.ndex.com.np/>

Dear Sir/ Madam,

I/We _____ (name of the continuing Designated Partner/normal partner) hereby inform the Exchange about the appointment of Mr. / Mrs. _____ (name of the incoming Designated Partner) as a Designated Partner.

The authorization letter informing about the change in designated partner is attached here with along with the necessary documents as required by the Exchange.

I/We, _____, the member of the Exchange hereby seek your approval for change in designated partner.

FOR _____ (name of the Firm)

(Signature of the continuing designated partner/ normal partner)

(On the letterhead of the Member)

Date:-

To,

Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal

Dear Sir/ Madam,

We hereby authorize Mr. /Ms. _____ and Mr. /Ms. _____ to be the Designated Partner/s of the Firm/partnership/LLP for all matters related to the membership with Nepal Derivative Exchange Limited.

Further, Mr. /Ms. _____ AND /OR Mr. /Ms. _____ of the firm/ partnership/ LLP are also authorized to execute individually / jointly all documents / agreements on behalf of the firm/ partnership/LLP for operations of Nepal Derivative Exchange Limited.

Name of All Partners	Signature

Place:

Company stamp

(On the letterhead of the Member)

Date:-

To,
 Membership Department
Nepal Derivative Exchange Ltd.
 NDEX Complex, Subidhanagar, Tinkune
 Kathmandu-35, Nepal

DETAILS OF PARTNERS AS ON _____ (After change)

Sr. No	Name	Fathers Name	Date of Birth	Educational Qualification	PAN/ DPIN	Residential Address & Telephone/ Mobile Nos./ Email ID/ Fax No	Designated partners (Yes/No) #	Sharing ratio		Directorships/ / controlling shareholding in other companies
								Amt	% ratio	
1										
2										
3										
4										

NOTES:

Identify designated partner(s) (A designated partner has to be Under Graduate/Graduate/Post Graduate/ Professional and possesses requisite experience pertaining to derivative or commodities future market.)

1. Authorized Signatory
 (Designated Partner)

2. Authorized Signatory
 (Designated Partner)

Company Stamp

Place:

**(On the letterhead of the Member)
Format of Undertaking – Corporate Entity**

(To be given by the Member on his letterhead and to be signed by the Incoming Designated Partner and put the Company stamp of the firm)

Date:

To
Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal

Dear Sir/ Madam,

I, _____ (name of incoming designated partner), have been appointed as designated partner in _____ (Trade name of the Member) who is the existing member of the Nepal Derivative Exchange Limited (NDEX).

I hereby confirm that I am not Proprietor / Designated Director in any other entity having the membership of the NDEX

Further I hereby confirm that I satisfy the eligibility criteria in terms of provisions of the Rules, Bye-Laws, Business Rules and Circulars and any other notifications issued from time to time if any, by NDEX

I hereby declare that the information given above is true.

Yours faithfully,

For (Name of the Member)

Signature of the Incoming Designated Partner

Name:

(Company Stamp)

Place:-

(On the letterhead of the Member)

Date:

To

Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal

Dear Sir/Madam,

I/We hereby confirm/undertake that _____ (Trade Name of the Member) and _____ (Name of Designated Partner) _____, (Name of the Designated Partner) and constituents of dominant promoter group;

- a) Are not debarred/suspended/declared defaulters by SEBON /Any recognized Commodity Exchange or recognized Stock Exchange or any other statutory body?
- b) Are not connected with any of the defaulting/ suspended member of any Stock Exchange/Commodity Exchange.
- c) There are no complaints/disciplinary action against me/us at SEBON any recognized Stock Exchange/ any recognized Commodity Exchange.
- d) Have no investigation/ enquiry by SEBON any recognized Commodity Exchange is pending against us or undertaken against us.

In case of any action/complaints/investigation/enquiry by any Statutory Agency/Regulatory Agency/Stock Exchange/Commodity Exchange in future, I/We undertake to intimate the Exchange immediately.

I/We declare that the information given above is true.

Yours faithfully

For (Name of the Member)
1. Authorized Signatory
(Designated Partner)
Company Stamp
Place:-

2. Authorized Signatory
(Designated Partner)

**(On the letterhead of the Member)
Format of Undertaking**

(To be given by the Member on his letterhead and to be signed by continuing designated partner/normal partner as well as by the incoming designated partner under the Company stamp)

Date:

To

Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal

Dear Sir/ Madam,

We hereby propose to appoint Mr. / Mrs. / Ms. _____ as a designated partner of our firm. The details and information with respect to said designated partner is as follows:

S.N	Details	
1	Name	
2	Father/Husbands name	
3	Nationality	
4	Residence Address	
	Tel. No. :	
	Mobile No.:	
	Email:	
5	Office Address	
	Tel. No. :	
	Mobile No.:	

	Fax No.:	
	Email:	
6	Date of Birth and Age	
7	PAN No	
8	Educational Qualification	
9	Experience (in details)	
10	Sharing in any other firm	
11	Interests in any other firm as a Partner	Yes/No

Signature of continuing Designated
Partner/ Normal Partner
With Company stamp

Signature of Incoming Designated
Partner/Normal Partner
With Company stamp

With Company Stamp

With Company stamp

(On the letterhead of the Member)

Format of Undertaking

(To be given by the Member on his letterhead and to be signed by continuing designated partner/normal partner as well as by the incoming designated partner under the Company stamp of the Firm)

Date:

To
Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal

Dear Sir/ Madam,

We hereby propose to appoint Mr. / Mrs. / Ms. _____ as a designated partner of our firm _____ (name of the member).

We hereby certify that this change in designated partner is not accompanied by / associated with a change in sharing */ management* / control */ dominant promoter group (DPG)*.

Thanking you

Yours faithfully

Signature of continuing Designated
Partner/ Normal Partner
With Company Stamp

Signature of Incoming Designated
Partner/Normal Partner
with Company Stamp

Place:

(On the letterhead of the Member)

Date:-

To,
Membership Department
Nepal Derivative Exchange Ltd.
NDEX Complex, Subidhanagar, Tinkune
Kathmandu-35, Nepal

SHARING PATTERN of _____ as on _____

Sr. No.	Name of the Partner (Name in full)	Amount Paid up Capital (Rs. In lakhs)	Sharing ratio (%)
1			
2			
3			
4			
5			
6			
7			
8			
9			
TOTAL			100%

Date:

Place:

1. _____
Signature of Designated Partner
Name of Designated Partner

2. _____
Signature of Designated Partner
Name of Designated Partner

Company Stamp

Company Stamp

Please take signatures and stamp of Designated Partner & Chartered Accountant on this page

CERTIFICATE

(To be given by a practicing Chartered Accountant)

This is to certify that the sharing pattern in M/s _____ as given above, based on my/ our scrutiny of the books of accounts, records and documents is true and correct to the best of my/our knowledge and as per information provided to my/our satisfaction.

Date:

For (Name of Accounting Firm)

Place:

Name of the Partner/Proprietor

Membership Number

Company Stamp

(On the letterhead of the Member)

Date:-

To
 Membership Department
Nepal Derivative Exchange Ltd.
 NDEX Complex, Subidhanagar, Tinkune
 Kathmandu-35, Nepal

DETAILS OF DOMINANT PROMOTER GROUP as on _____

Sr. No	Name of dominant partner	Person (s) supporting dominant partner	Relation	Total Amount of Paid Up capital	Sharing ratio %		% of Total Sharing ratio
					Self	Relatives	
1							
2							
3							
4							
TOTAL							

\$ Please specify relation of person supporting dominant partner
For arriving at the sharing ratio of persons constituting the dominant group, the sharing ratio of close relatives, namely parents, spouse, children and their descendants, brothers and sisters only may also be counted provided these relatives have given an irrevocable, unconditional support in writing in the prescribed format to the Exchange.

Place:

- 1. Authorized Signatory
 (Designated Partner
 Company Stamp

UNDERTAKING FROM RELATIVE OF PERSONS CONSTITUTING DOMINANT PROMOTER /PARTNER GROUP (IF APPLICABLE)

I, Mr. /Ms. /Mrs. _____, son / daughter / wife of _____ resident of _____ declare that

I am partner in _____ (Name of the Partnership Firm for sharing profit and loss to the extent of ____% as on _____ (Date)

I state that I shall irrevocably and unconditionally support in respect of my sharing pattern.

Mr./ Mrs. _____, a partner in the above mentioned partnership firm. I further state that I have no objection to my above mentioned sharing pattern being clubbed with the sharing pattern of Mr. / Mrs. _____ who is my _____ (give relationship with the latter) for the purpose of determining the dominant partner group of the said Partnership Firm

This support is irrevocable and I also undertake to give prior information to Nepal Derivatives Exchange Limited before selling or otherwise transferring my part or whole of my above mentioned sharing pattern.

Date:

Signature: _____

(Name of the Relative of Persons constituting DPG)

Place:

WITNESSED BY:

(1) Name:

(2) Name:

Address:

Address:

Signature:

Signature:

Place:

Place:

Date:

Date

Note: For arriving at the sharing of persons constituting the Dominant promoter group, the sharing of close relatives, namely parents, spouse, children and their descendants, brothers and sisters only may be counted provided these relatives give an irrevocable, unconditional support in writing on the prescribed format