

## Annex A – Application Form for Good Delivery Listing & Declaration

### Application Form for PLATINUM / PALLADIUM † Good Delivery Listing

Name : \_\_\_\_\_ of \_\_\_\_\_ (refinery)

Address of Refinery \_\_\_\_\_.

\_\_\_\_\_.

\_\_\_\_\_.

Name of Company and address of Head Office if different from those of Refinery

\_\_\_\_\_.

\_\_\_\_\_.

\_\_\_\_\_.

Contact name, title and address to which correspondence should be addressed

\_\_\_\_\_.

\_\_\_\_\_.

\_\_\_\_\_.

Telephone No \_\_\_\_\_ Fax No: \_\_\_\_\_.

E-mail: \_\_\_\_\_.

† Delete as applicable

Please complete a separate Application Form for platinum and palladium if both metals are applied for.

See overleaf for documents and payment to be enclosed.

**Declaration** (To be signed by a Director/Authorised Officer of the Applicant, as appropriate.)

To: The London Platinum and Palladium Market

We confirm that we have read the LPPM paper on The Rules for Good Delivery Platinum and Palladium Plates and Ingots which sets out the specifications and procedures applied by the LPPM for the examination of the assaying capability and the testing of plates and ingots of Applicants for Good Delivery status. We also agree that this procedure should be applied to assess our melting and assaying capability and that, in order to be included by the LPPM in the list of Acceptable Refiners, we must satisfy the Management Committee of the LPPM that we have met the criteria and requirements of the tests laid down in the Procedures.

We agree to pay the initial application fee of the LPPM with this application, and those fees subsequently payable during the course of the testing procedures whether or not our application is successful.

We agree that if accepted onto the Good Delivery List, we will respond appropriately to any complaints from the market about the quality of our plates or ingots.

We agree that if accepted onto the Good Delivery List, we will submit to regular proactive monitoring.

Please declare (a) or (b)

(a) We are not a Member or Associate of the LPPM and agree to the payment of an annual monitoring fee in respect of continuing membership of the Good Delivery List

(b) As a Member/Associate of the LPPM, we understand that the annual Good Delivery List monitoring fee will be included as part of the annual charge for Membership/Associateship

For and on behalf of (Name of Applicant Company):

\_\_\_\_\_.

Signature of Director/Authorised Officer \_\_\_\_\_.

Name in BLOCK letters \_\_\_\_\_.

Date \_\_\_\_\_.

This application, together with all supporting documents, should be sent to the Chairman of the LPPM at the address specified for the Chairman in the list of the LPPM Management Committee members on the LPPM website, or such other address as the LPPM may specify