



SFE INFORMATION NETWORK - MEMBER PROFILE

Technical Services Centre

Phone: 9256 0111

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Date:

Group (1) Add Modify Delete

indicate with

Company Name: (2)

For office use only

Group Name: (2) Member Mnemonic

Group Type: Multi-Purpose (2)

Description: Same as Company Name (2)

SFE INFORMATION NETWORK - REQUIREMENTS

Authority Level - Day 2s *indicate with

(Correction of Allocation Errors)

Operator and Authorisor

One level of Authorisation

Dual level of Authorisation

Authority Level - EFPs ✖ indicate with

Operator and Authorisor

One level of Authorisation

Dual level of Authorisation

Authority Level BRC indicate with

For Office Use Only

Cross Check Member Authority - Day 2s

Set Up from File

	Operator Initial	Checker Initial
Op/Auth	<input type="text"/>	<input type="text"/>
Auth 1	<input type="text"/>	<input type="text"/>
Auth 2	<input type="text"/>	<input type="text"/>

Cross Check Member Authority - EFPs

Set Up from File

	Operator Initial	Checker Initial
Op/Auth	<input type="text"/>	<input type="text"/>
Auth 1	<input type="text"/>	<input type="text"/>
Auth 2	<input type="text"/>	<input type="text"/>

Director's Name:

Director's Signature:

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*SFECH Signatory:

✖ Surveillance Signatory:

Modify Databases

	Operator Initial	Checker Initial
Add/Remove Mnemonic	<input type="text"/>	<input type="text"/>
to ALL SFEIN Member Group (3)		
Add/Remove Mnemonic	<input type="text"/>	<input type="text"/>
to Groups indicated below (3)		

For office use only

Membership (to be supplied by SFE Membership Department)

Membership Initial

	Add	Remove		Add	Remove		Add	Remove
Associate Member	<input type="checkbox"/>	<input type="checkbox"/>	Lessee of Local Mship	<input type="checkbox"/>	<input type="checkbox"/>	Permit Holders	<input type="checkbox"/>	<input type="checkbox"/>
Associate Members (Dealing)	<input type="checkbox"/>	<input type="checkbox"/>	Local Members	<input type="checkbox"/>	<input type="checkbox"/>	Quote Vendors	<input type="checkbox"/>	<input type="checkbox"/>
Back Office Accounting Suppliers	<input type="checkbox"/>	<input type="checkbox"/>	Market Representatives	<input type="checkbox"/>	<input type="checkbox"/>	SYCOM Managers	<input type="checkbox"/>	<input type="checkbox"/>
Back Office Managers	<input type="checkbox"/>	<input type="checkbox"/>	Non-Clearing Members	<input type="checkbox"/>	<input type="checkbox"/>	Temporary Local Members	<input type="checkbox"/>	<input type="checkbox"/>
Clearing Managers	<input type="checkbox"/>	<input type="checkbox"/>	NZ Agents	<input type="checkbox"/>	<input type="checkbox"/>			
Clearing Members	<input type="checkbox"/>	<input type="checkbox"/>	NZ Clearing Members	<input type="checkbox"/>	<input type="checkbox"/>			
Floor Members	<input type="checkbox"/>	<input type="checkbox"/>	NZFOE Permit Holders	<input type="checkbox"/>	<input type="checkbox"/>			