Membership Application CORPORATE

Please complete this application form and submit it to:

Jackie Harrison +44 (0)20 7369 1633 membership@balticexchange.com

> Baltic Exchange 38 St Mary Axe London EC3A 8BH



COMPANY DETAILS

Please enter your company details here:

Full company name	Enter details for the main company applying for membership, even if
Name for directory listing	you are located in a different office.
Place of registration	The name given for your directory listing will be used for your
Date of registration / /	company listing in the Baltic
Registration number	membership directory.
VAT no	VAT is charged where applicable.
Address	
Town	
County	
Postcode	
Country	
Company email address	eg. info@domain.com
Switchboard number	(not a personal email address)
Website	
Please indicate the nature of your business:	
Broker	SHIPOWNERS, TRADERS and
Charterer	CHARTERERS trade on their own
Exclusive manager	account. BROKERS do not trade on
Shipowner	their own account but arrange transactions between principals.
Trader	OTHERS includes; legal, financial
Other (please specify)	and insurance firms etc
Please indicate if your company is active in the FFA market	

DIRECTORS/SHAREHOLDERS 2

Please list the names and	details of	the c	ompany's	directors
and their shareholders.				

If your company is a listed entity with publicly available shareholder information, tick here and skip to Section 3.

Director or shareholder 1 Title	
(Mr/Mrs/Miss/Ms/Other)	
Family name	
Given name	
% shareholding	
Director or shareholder 2 Title	
(Mr/Mrs/Miss/Ms/Other)	
Family name	
Given name	
% shareholding	
Director or shareholder 3 Title	
(Mr/Mrs/Miss/Ms/Other)	
Family name	
Given name	
% shareholding	
Director or shareholder 4 Title	
(Mr/Mrs/Miss/Ms/Other)	
Family name	
Given name	
% shareholding	
% shareholding	

PROPOSER & SECONDER

Applications must be endorsed by two current **members**. Please enter details of your sponsors here so that the Baltic can request their endorsement by email.

Proposer	Your PROPOSER and SECONDER
Title (Mr/Mrs/Miss/Ms/Other)	must be individual members and
Family name	not employed at the Baltic Exchange. Please contact the
Given name	Baltic for assistance identifying
Company	current members.
Telephone number	
Email address	
Seconder	
Title (Mr/Mrs/Miss/Ms/Other)	
Family name	
Given name	
Company	
Telephone number	-
Email address	

It is recommended that shipbroking members hold insurance cover against claims for errors and omission and breaches of warranty or authority at a level appropriate to the style, scope and scale of their business. Cover can be obtained through an insurance policy, a protection and indemnity club or the Chartering Brokers Mutual Insurance Association.

Do you have insurance for your shipbroking activities?

Yes

No

If 'No', tick here if you would like to be contacted by ITIC about insurance cover.

INSURANCE (to be completed by shipbrokers only) To identify your band of membership, please identify which of the tiers below captures all employees in all offices that will work with Baltic information and other Baltic services.

Number of employees and number of office locations:

Up to 4 people / up to 1 office Up to 9 people / up to 2 offices Up to 19 people / up to 3 offices Up to 49 people / up to 4 offices

Unlimited people and offices - please indicate how many offices here:

Your subscription is based on the number of employees using Baltic Exchange services within their work as well as the number of locations that they are working from.

MEMBERSHIP

For further details on subscription band fees please contact the Baltic Exchange at marketing@balticexchange.com.

Do you require access to freight market information?

No

Level 2

Additional subscriptions for Level 2 users

Do you require an API feed?

Do you require a Settlement Licence?

DATA LICENCES

Level 1 data is now provided free of charge to any employees of member companies.

API connectivity to all current and historic data.

SETTLEMENT LICENCE: Trading entities that reference Baltic data in contracts (e.g. index linked fixtures), must either hold a Baltic settlement licence or; use a clearing house or; a panel broker that is relevant to that market segment (Dry Cargo, Tanker or Gas) until contract expiry.

For further details on subscription band fees please contact the Baltic Exchange at marketing@balticexchange.com.

PRIMARY CONTACT DETAILS 7

Please use this section to nominate employees from your company to become named Baltic members:

I am registering as a:	Principal N	lember	Represe	entative Member	
Title (Mr/Mrs/Miss/Ms/Other) _					PRINCIPAL MEMBERS are senior
Family name					members of your team (e.g. a Head of Desk or Director). All
Given name					others should register as
Known as					REPRESENTATIVE
Date of birth	/	/			
Job title					
Department or desk function _					
Direct telephone number					
Mobile number					Your PRIVATE WORK EMAIL (i.e.
Private work email address					not hotmail, gmail or a generic
Desk email address					desk address) will be required to access the Baltic app.
Company name (if different to section 1)					
Office address (if different to section 1)					
City					
County					
Postcode					
Country					
Optional information					
Personal email address					
IM handle					An IM HANDLE may include Skype,
Career history					ICE, WeChat etc
1. Dates /	/	to	_ /	_ /	
Company					
Position					
2. Dates /	/	to	_/	_ /	
Company					
Position					

*Further copies of this form can be found in Appendix 8A on page 9 for additional employees.

GENERAL DECLARATION

(to be completed by all applicants)

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By signing below, you agree to be bound by:

1. Baltic Exchange Terms & Conditions

Please note that periodically, you will be asked to agree to Baltic Exchange Terms & Conditions, such as prior to the first time you login to balticexchange.com.

2. Baltic Exchange Data Policy

All Baltic Data is copyright of the Baltic Exchange Ltd. Use of Baltic data within your company is governed by your subscription type which is defined as Level 1, Level 2 and Settlement Licence. Full details can be found at www.balticexchange.com/data-policy

3. The Baltic Rules and Code

At all times within their business dealings, Baltic members must adhere to The Rules of the Baltic Exchange which include a code of ethical conduct known as "The Baltic Code". Any company found not to be complying with the Code, risks being 'Posted'.

4. Consent for Data Collection and Use

I authorise the Baltic Exchange to collect and use the information I have provided, and to share such information within the Baltic's group of companies and such third parties with which the Baltic may have relevant service arrangements, for internal statistical research, and for marketing and any reasonable ancillary purposes, including for the purpose of facilitating the Baltic Exchange's provision of products and services to me. I agree to receive notifications/calls/texts from the Baltic Exchange on such products and services.

The Baltic Exchange is committed to protecting your personal data. If you wish to withdraw or amend any consent or information that you have provided, or any part of your position information or consent, please make this request to membership@balticexchange.com.

Please refer to the documents in full on the Baltic Exchange website:

Baltic Exchange Terms & Conditions https://www.balticexchange.com/en/ site-services/terms-andconditions.html

Baltic Exchange Data Policy https://www.balticexchange.com/en/ site-services/data-policy.html

Baltic Rules https://www.balticexchange.com/en/ site-services/baltic-rules.html

Baltic Code

https://www.balticexchange.com/en/ who-we-are/the-baltic-code.html

Any deviation from any of the policies presented requires written permission from the Baltic.

Tick he	ere to confirm that you agree with the terms above	
Full name Position		
Signature		
Date	11	If you are filling out this form digitally on an Adobe Reader, please sign using the secure Digital ID. We also accept handwritten and scanned versions of this form.

	BROKER DECLARATION
confirm the	at the company will act as brokers only and that it will not at any time deal directly or indirectly on its own account. Client
noney will b	be kept in a specially designated client account and will be kept separate from the company's money.
Full name	
Position	
Signature	
Date	

	CHECKLIST	1(
In addition to this application form, please submit the follow	ving documentation:	
Your company's Certificate of Incorporation		
Change of Name certificates, or equivalent (if relevant)		
Any other comments:		
	— DATE EL	ECTE
//	(for Baltic E	xchange use on



Please	use	this	form	to	nominate	additional	Baltic	members:
110000	asc	CI IIO	101111	ιu	nonnaco	uuuuuuu	Durtio	members.

Register me as a	Principal Member	Representative Memb	er
Title (Mr/Mrs/Miss/Ms/Other)			PRINCIPAL MEMBERS are senior
Family name			members of your team (e.g. a Head of Desk or Director). All
Given name			others should register as
Known as			REPRESENTATIVE
Date of birth	//		
Job title			
Department or desk function			
Direct telephone number			
Mobile number			
Private work email address			Your PRIVATE WORK EMAIL (i.e. not hotmail, gmail or a generic
Desk email address (if applicable)			desk address) will be required to
Company name (if different to section	n 1)		access the Baltic app.
County Postcode			
Personal email address			An IM HANDLE may include
IM handle			Skype, ICE, WeChat and others.
Career history			
1. Dates /	to	//	
Company			
Position			
2. Dates /	to	//	
Company			
Position			