



## ACCESS REQUEST AND INFORMATION FORM

This Access Request and Information Form (“Access Request Form”) is being executed pursuant to the Eris Exchange Connection Agreement, Eris Exchange Third Party Connection Agreement, or Eris Exchange Clearing Firm Agreement (the “Agreement”) between ERIS EXCHANGE, LLC., a Delaware Limited Liability Company with its principle place of business at 227 West Monroe Street, Suite 2070, Chicago, Illinois 60606, (“Eris Exchange”) and \_\_\_\_\_ (“Company”). Any capitalized terms not defined herein shall have the meaning set forth in the Eris Exchange Connection Agreement or Third Party Connection Agreement.

Company must review this entire Access Request Form and complete those sections that relate to the Eris SwapBook Access Method Company has selected. Company must sign this Access Request Form in the spaces provided under “Company.”

Any information required to be provided in this Access Request Form shall be treated by Eris Exchange in accordance with the Eris Exchange privacy policy, which may be found at [www.erisfutures.com](http://www.erisfutures.com).

Notwithstanding anything to the contrary in the Eris Exchange Connection Agreement, Eris Exchange Third Party Connection Agreement, or Eris Exchange Clearing Firm Agreement, fees for connectivity will begin accruing on the date that successful testing of the connection is completed.

**Company has caused this Access Request and Information Form to be executed by its authorized representative.**

IN WITNESS WHEREOF, the Parties have executed this Agreement and attached section(s) as of the date set forth below.

**Eris Exchange, LLC**

**Company**

By: \_\_\_\_\_

By: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

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## A. COMPANY INFORMATION

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Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Billing Address:**

(If different from address above): \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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## B. NETWORK ACCESS INFORMATION

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Select desired cross-connect option from the list below:

Direct Cross-Connect	
Cross-connect in CH1 with NO redundant connection	<input type="checkbox"/>
Cross-connect in CH1 with a redundant connection at CH1	<input type="checkbox"/>
Cross-connect in CH1 with a redundant connection at a POP location	<input type="checkbox"/>
Cross-connect at POP location with NO redundant connection	<input type="checkbox"/>
Cross-connect at POP location with a redundant connection at CH1	<input type="checkbox"/>
Cross-connect at POP location with a redundant connection at POP	<input type="checkbox"/>
IBCC in CH1 with NO redundant connection	<input type="checkbox"/>
IBCC in CH1 with a redundant connection at CH1	<input type="checkbox"/>
IBCC in CH1 with a redundant connection at a POP location	<input type="checkbox"/>
Cross-connect at POP location with a redundant IBCC in CH1	<input type="checkbox"/>

*\* IBCC (Inter-Building Cross Connect) is required at CH1 for firms that do not have servers on the 5<sup>th</sup> or 6<sup>th</sup> floors*



**Choose Data Center Location(s) for Connection(s):**

CH1

(350 E. Cermak, Chicago)

NY4

(755 Secaucus Road, Secaucus)

LD4

(2 Buckingham Avenue, Berkshire)

TK1

(2-20-1 Shiohama Kiba Koto-ku, Tokyo)

**Provide Cross-Connect Information:**

Fiber (Select One):  Single Mode  Multi Mode

Cage Location: \_\_\_\_\_

Cabinet and/or Rack: \_\_\_\_\_

Patch Panel/Port: \_\_\_\_\_

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**C. CONTACT INFORMATION**

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**Company Technical Contacts:**

**Primary Contact:** \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Secondary Contact:** \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

**24-Hour Contact:** \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Company Billing Contact:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

E-Mail: \_\_\_\_\_



**Company Business Contact:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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**D. ADDITIONAL INFORMATION**

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<b>Eris Exchange Use Only</b>	
Date initial request was received:	
Date request was approved:	
Company LOA attached:	