|  |
| --- |
| Act on Behalf – Marginal Lending On Request – “MLOR” [ECMS MOP Section 4.6.2]Page 1 of 1 |
| Date: DD/MM/YYYY | Requestor: Select one |

Please fill in the table below with the information required

|  |
| --- |
| Business Justification |
| Purpose: |
| To be processed before:**Required format: DD/MM/YYYY HH:MM CET/ CEST** |  |
| Actions to be performed  | Choose an item. |

Please fill in the table below with the information required

|  |
| --- |
|  MLOR Information |
| Counterparty Transaction Reference Number**Mandatory** |  |
| RIAD Code**Optional** |  |
| Pool ID**Mandatory** |  |
| Amount**Mandatory** |  |
| Intended Settlement Date**Mandatory** |  |
| Last update reason**Optional** |  |

Date and signature of the Counterparty Authority : a single signature is sufficient if the signer has an individual delegation of authority (signer "A"), two signatures are required if the signers are authorized to sign jointly (signer "B").

Date and signature