

Application Form of Futures Advanced Trading System (FATS) (Only Accepts Original Copy)

To: Phillip Commodities (H.K.) Ltd 11/F, United Centre, 95 Queensway, Hong Kong

Please read the provisions of the On-line Trading Agreement as set out in Schedule 1 before applying the Futures Advanced Trading System. Please complete the application form, send to us by post or in person. For enquiry, please contact our hotline at (852) 2277 6661 or email to ats@phillip.com.hk

Futures Advanced Trading System (FATS)

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Free Trial Period	14 days after first time activation (including Saturday, Sunday and public holidays). FATS		
	service will continue after free trial period until it is cancelled by prior notice (whether		
	verbal or in writing)		
Service Fee	HK \$500 per month		
	■ The cut-off day of FATS Service is the last day of each calendar month.		
Service Fee Waiver	Monthly fee will be waived if equivalent futures commission is generated in the previous		
Scheme	calendar month.		

- Remarks: 1 Should you wish to terminate the service, please kindly call 2277-6661 on or before next month start (the first day of each month). Otherwise, FATS Service will be automatic renewed.
 - 2 All Service Fees are non-refundable.
 - 3 Client is required to pay the difference between service fee & commission in case that the commission does not meet the above requirement.
 - 4 If client's account balance amount is not enough to pay for FATS service fee, FATS service will be suspended promptly.
 - 5 Foreign Future Price-quote and Trading Service are supplied to all Foreign Future account holders promptly.

Payment Method

I authorize the payment to Phillip Commodities (H.K.) Ltd for the service of Futures Advanced Trading System from my futures account.

I understand the FATS terms and conditions and provisions of On-line Trading Agreement as set out in Schedule 1 and accept to be bound by them.

A/C No. (must fill in)	AE No	
Client Name	AE Signature	
Client Signature	Date	(yy) (mm) (dd)

For Office Use only

Client info. Verified by	Approved by:	
Name of staff:	Signature:	Date:
Effective Date:		