

Issuer Application

Record Id:

GENERAL COMPANY INFORMATION

i Application Name *

Issuer Name *

Company Address 1 *

Company Address 2

Company City *

Company State/Province:

Company Postal Code *

Company Country *

EU Home Member Country, if other than the country of the listing in the application

Company Telephone *

Company Website *

Company Registration Number *

LEI code (Legal Identity Identifier) *

Name of the Company's News Distributor *

Issuer Type

What type of financial instruments is the company applying to list? *

i Application Contacts

Please provide contacts for the purposes of processing this Application. In addition, Nasdaq recommends that you share access to this form with at least one other representative by entering their email address on our Share Your Form page.

	Company Contact *	Additional Contact
Name *	<input type="text"/>	<input type="text"/>
Title/Firm	<input type="text"/>	<input type="text"/>
Phone *	<input type="text"/>	<input type="text"/>
Email *	<input type="text"/>	<input type="text"/>

Billing Contacts

Please provide the Company's billing address, if the address is different than the Company Address provided above.

Check here, if billing address is the same.

Billing Address 1	<input type="text"/>	*
Billing Address 2	<input type="text"/>	
Billing City	<input type="text"/>	*
Billing State/Province	<input type="text"/>	
Billing Postal Code	<input type="text"/>	*
Billing Country	<input type="text"/>	<input type="checkbox"/> *
VAT-number (EU Countries Only)	<input type="text"/>	

Please provide contact information for someone within your Company's Finance department.

Billing Contact

Name	<input type="text"/>	*
Title	<input type="text"/>	*
Email	<input type="text"/>	*
Telephone	<input type="text"/>	*
Fax	<input type="text"/>	

SUPPORTING DOCUMENTS

Supporting Documents

Other Supporting Documentation

Prior to approval, Nasdaq will require [Rules of the Exchange](#) supporting documentation. These documents should be submitted electronically.

Documents should be provided using one of the following formats: MS Word, MS Excel, CSV or PDF.

Uploading documents is easy:

Select document using the "Browse" button.

WORKING CAPITAL

Please state whether the issuer's existing working capital is sufficient to cover the Issuer's needs over the next twelve months.

Please comment and confirm. If no, please state when the expected deficiency will occur (month/year)

 AFFIRMATION

Name	<input type="text"/>	*
Title/Firm	<input type="text"/>	*

Date

*

Initial Here

*

I have been authorized by the company and have the legal authority to provide information on the company's behalf; to the best of my knowledge and belief, the information provided is true and correct as of this date; and I will promptly notify Nasdaq of any material changes.

Form Created By: on ; Form Last Updated By on , Form Owned By:

* Indicates a field required for submission.