

REGISTRATION FORM FOR PARTICIPATION IN e-ROC AUCTION

PARTICIPANT PARTICULARS

Full Company Name:

Registered Office/Address:

Company registration number (where applicable):

DETAILS FOR THE SERVICE OF NOTICES:

Address (if different from above):

Marked for the attention of:

Telephone Number:

Fax Number:

E-mail:

DETAILS FOR THE ISSUE OF USER NAME AND SECURITY PASSWORD:

Address:

Marked for the attention of:

Telephone Number:

Fax Number:

E-mail:

or

Marked for the attention of:

Telephone Number:

Fax Number:

E-mail:

Details of contact for payment of NFPAS invoices:

Address:

Marked for the attention of:

Telephone Number:

Fax Number:

E-mail:

Please note: Payment is required to be made by direct transfer to NFPAS Ltd's specified account within 10 Banking Days of the date of the invoice.

The Participant agrees that this Registration Form is submitted subject to the relevant e-ROC Auction Code, and hereby agrees that it is bound by and shall comply with the terms of the e-ROC Auction Code, as amended from time to time by NFPAS in accordance with its terms.

By signing and returning this Registration Form the Participant agrees and acknowledges that the relevant e-ROC Conditions of Sale will apply to the purchase of any Lot by the Participant in an Auction if the Participant is the Successful Bidder, and that the price to be paid by the Participant in respect of any Lot for which it is the Successful Bidder will be determined by the Auction process.

..... (signature)

Signed by:(name)

for and on behalf of: (full name of Supplier)

Date: