

FORM SEF

SWAP EXECUTION FACILITY APPLICATION OR AMENDMENT TO APPLICATION FOR REGISTRATION

COVER SHEET

	ICAP GLOBAL DERIV	ICAP GLOBAL DERIVATIVES LIMITED							
	Exact name of Applicant as specified in charter								
	2 Broadgate, London EC2M 7UR, United Kingdom								
	Address of principal executive offices								
	If this is an APPLICATION for registration, complete	e in full and check here.							
Ø	If this is an AMENDMENT to an application, or to an existing order of registration, list all items that are amended and check here								
	Exhibit N Exhibit N-15 Addendum Exhibit N-15 Schedule B Exhibit T								
GE	NERAL INFORMATION								
1.	Name under which the business of the swap execution facility is or will be conducted, if different than name specified above (include acronyms, if any):								
	N/A								
2.	If name of swap execution facility is being amended, state previous swap execution facility name:								
	N/A								
3.	Contact information, including mailing address if dif	ferent than address specified above:							
	N/A								
	Number and Street								
	City State	Country Zip Code							
	Main Phone Number	Fax							
	www.icap.com/SEF	Gregory.Compa@us.icap.com							
	Website URL	E-mail Address							

4. List of principal office(s) and address(es) where swap execution facility activities are/will be conducted:



	<u>C</u>	Office .	<u>Address</u>						
_	Princ	ipal Office	2 Broadgate,	London EC2M 7UI	R, United Kingdon	n			
5.	If the Applicant is a successor to a previously registered swap execution facility, please complete the following:								
	a.	Date of succ	cession						
		N/A							
	b. Full name and address of predecessor registrant								
		N/A					-		
		Name							
		Number ar	nd Street						
		City		State	C	ountry	Zip Code		
		Main Phon	e Number		Website URL				
RU	ISINES	SS ORGANIZ	ZATION						
			/	•			•		
6.	Appli	cant is a:							
	Corp	oration							
	Partn	ership					*		
	Limite	ed Liability C	ompany						
	Other form of organization (specify): Private Limited Company								
7.	Date	of incorporat	ion or formation:	Septe	ember 21, 1998				
8.	State	of incorpora	tion or jurisdiction of o	ganization: Unite	d Kingdom				
9.	The Applicant agrees and consents that the notice of any proceeding before the Commission in connection with this application may be given by sending such notice by certified mail to the person named below at the address given.								
	Gen	neral Counse							
		t Name and			<u> </u>				
	ICA	P GLOBAL D	DERIVATIVES LIMITEI	כ					
		ne of Applica							
	2 Br	roadgate							
		nber and Stre	eet						
	Lon	don EC2M 7	UR, United Kingdom						
	City		•	State	Zip Code				



SIGNATURES

10. The Applicant has duly caused this application or amendment to be signed on its behalf by the undersigned, hereunto duly authorized, this 23rd day of September, 2016. The Applicant and the undersigned represent hereby that all information contained herein is true, current, and complete. It is understood that all required items and Exhibits are considered integral parts of this Form SEF and that the submission of any amendment represents that all unamended items and Exhibits remain true, current, and complete as previously filed.

ICAP G MOBAL DERIVATIVES LIMITED

Name of Applicant

Signature of Ouly Authorized Person

Gregory Compa, Chief Compliance Officer

Print Name and Title of Signatory