LOMBARD SECURITIES INCORPORATED

CRD Verification / Credit Authorization

I, _____, hereby authorize Lombard Securities Incorporated to access my CRD record through their FAQS system or in writing. I additionally authorize Lombard Securities Incorporated to undertake and make any credit or other background verifications that they may deem necessary with respect to their review of my qualifications; and, in connection therewith, I hereby authorize any party so contacted by Lombard Securities Incorporated to release the information requested of them.

I understand that this information is requested for regulatory compliance purposes only, and that such information will be considered confidential by Lombard Securities Incorporated.

By:_____ _____
(*Signature*) (*Date*)

_____
(*Social Security Number - required*)

_____
(Date of Birth - required)

_____
(*CRD Number - if known*)

I would like to request a list of registration fees for the following jurisdictions:

___, ___.

Form 453 (REV4/05)
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