HSBC Provident Fund Trustee (Hong Kong) Limited

c/o The Hongkong and Shanghai Banking Corporation Limited 香港上海滙豐銀行有限公司 PO Box 73770 Kowloon Central Post Office 九龍中央郵政信箱73770號

Place into the MPF drop-in box at designated Hang Seng Bank branches 投放於指定恒生銀行分行的強積金寄存辦理箱

Hang Seng MPF Employer Direct 恒生強積金僱主專線: 2288 6822 Hang Seng MPF Service Hotline 恒生強積金服務熱線: 2213 2213

HANG SENG MANDATORY PROVIDENT FUND FLEXI-CONTRIBUTION ACCOUNT MAINTENANCE REQUEST FORM (FLEXI-CONTRIBUTION ACCOUNT HOLDER)

恒生強積金:更改靈活供款賬戶表格(靈活供款賬戶持有人)



Note 注意:

- Please complete in CAPITAL and BLOCK LETTERS and tick ✔ the appropriate box(es). 請用大楷及正楷填寫,並於適當的方格內加上「✔」號。
- Please note that the Flexi-Contributions is not applicable for persons who are US citizen/with US nationality, are US resident or US tax payer, or have a US address (e.g. primary mailing, residence or business address in the US). 請注意靈活供款不適用於美國公民/擁有美國國籍的人士、美國居民或美國納 税人、或有美國地址的人士(例如主要通訊地址、居住地址或工作地址在美國)。
- Certified true copies should be certified by any of the following personnel 提交認證副本可經由下列人士核證:

1. Full name (in English) 全名(英文) (same as that shown on your HKID card/Passport 與香港身分證/護照上的姓名相同)

- A certified public accountant/lawyer/banker/notary public acceptable to entities of HSBC Group; or 任何滙豐集團成員認可的執業會計師/律師/ 往來銀行/公證人;或
- A member of Hong Kong Institute of Chartered Secretaries (HKICS). 任何香港特許秘書公會會員。
- Please return the completed form and cheque payment (if applicable) to the Administrator The Hongkong and Shanghai Banking Corporation Limited. Please provide a certified true copy of your HKID card, if this was not previously provided or if there has been any change of information contained in your HKID card. 請將填妥的表格及支票(如適用)寄交行政管理人 - 香港上海滙豐銀行有限公司。若以往未曾提供或資料已變更,請提供你的 香港身分證之認證副本。
- The information provided will be used in accordance with the relevant MPF Ordinance and/or its Regulations and the same manner as mentioned in the "Personal Information Collection Statement for Hang Seng Mandatory Provident Fund" ("PICS"). The PICS can be obtained through Hang Seng MPF website hangseng.com/empf or MPF hotline 2288 6822 (Employer) or 2213 2213 (Member). By signing this form, your present choice of receiving direct marketing information will remain unchanged. If you wish to update the use of your personal data for direct marketing purpose as stated in the PICS from the Hang Seng MPF scheme, you may exercise your right by notifying us. 所有已提供的資料將按照有關強積金條例及/或其規 例及《恒生強積金的收集個人資料聲明》(「聲明」)處理。該聲明可透過以下恒生強積金網站 hangseng.com/empf 或強積金熱線 2288 6822(僱主)或 2213 2213 (成員)索取。在簽署本表格後・你現時關於接收直接促銷資訊的選擇將維持不變。如你希望更新在恒生強積金計劃聲明中使用你的個人資料作直接促銷的用 途,你可通知我們行使你的選擇權。

A. Personal information 個人資料

 \square on | | day \exists

2. HKID/Passport no. 香港身分證/護照號碼	3. Scheme ID of Flexi-Contribution Account 靈活供款賬戶的計劃編號
	3 8 8 8 8 8 8
B. Instruction type 指示類別	
	明供款額
The minimum amount of monthly regular Flexi-Contributions is HI	KD300. 最低每月定期靈活供款額為 港幣300元。
HKD 港幣 元	
a. Please specify source of fund 請註明資金來源	
☐ Earning from work 工作薪金	Personal savings 個人儲蓄
☐ Inheritance 遺產承繼	■ Sale of an asset 出售資產 (e.g. property 例如物業)
☐ Investment return/Investment matured 投資回報/投資到期	Others 其他 (please specify 請註明:)
b. Current salary range (HKD per month) 現有入息概況 (每月	港幣)
■ N/A 不適用 ■ Below 10,000 以下	1 0,000 - 19,999
20,000 - 39,999	70,000 - 99,999
□ 100,000 - 199,999 □ Above 200,000 以上	_ (please specify 請註明:)
which is not a public holiday, a gale warning day or a black ra 日,則指隨後的非公眾假日、烈風警告日或黑色暴雨警告日之曆	
 Please note that the monthly direct debit date may be varied of 接支賬日期或會因有關銀行戶口的交易安排而有所不同。 	due to the transaction arrangement of the relevant bank account. 請注意每月直

■ on the last day of each month 每月最後一天

B. Instruction type (cont'd) 指示類別(續) □ 3. Change of direct debit account 更改直接支賬戶口 Please complete Section D 'Direct debit authorisation' to authorise direct debit from your new designated bank account. 請填 妥D部「直接付款授權書」以授權於新指定的銀行戶口設立直接支賬。 To avoid any failure of direct debit transactions, please do not cancel the direct debit instruction of your previous bank account until your new designated bank account has been debited for the first time. 為避免直接支賬被拒絕的情況發生,請於新指定的銀行戶口獲成功扣除第一次 供款後,才取消舊有的銀行戶口直接支賬指示。 If in the rare situation that the direct debit is rejected by your bank and you would like to make the contribution by cheque first, please enclose a crossed cheque issued by the scheme member stated in Section A1 and made payable to 'HSBC Provident Fund Trustee (Hong Kong) Limited'. 如果在不尋常的情形下,你的銀行未能處理直接支賬而你想先以支票完成供款,請附上由註明於A1欄之 計劃成員簽發的劃線支票,抬頭祈付「HSBC Provident Fund Trustee (Hong Kong) Limited」。 【 4. Cancellation of direct debit instruction for regular Flexi-Contributions 取消定期靈活供款的直接支賬指示 Please allow at least one month advance notice when specifying the effective date. 請於指定生效日期時給予最少一個月通知。 Effective date 生效日期 Month 月 Day 日 Year 年 ☐ 5. Change of employment status 更改僱傭狀況 ■ Employed 受僱 Name of employer 僱主名稱: ___ Address of employer 僱主地址(city and country/region 城市和國家/地區): ______ Occupation 職業: _ In position of control of the corporation 為該公司/機構的管理層 ☐ Yes 是 ■ No 否 ■ Business Owner 業務擁有人 ■ Self-employed 自僱 (For business owner or self-employed 適用於業務擁有人/自僱) Name of company 公司名稱: _ Business address 營業地址: ______ Job title 工作職位: ■ Not currently employed 現時並未受僱 ■ Retired 退休 ■ Housewife 家庭主婦 ■ Others 其他 (please specify請註明: ___ ☐ 6. Change of nature of business 更改業務性質 ■ Agriculture/Livestock specialties 農業/家畜業 ■ Construction 建築 ■ Business services 商用服務 ☐ Finance/Insurance 金融/保險 ■ Catering 餐飲業 ☐ Freight transport/Cargo/Couriers 貨運/航運/速遞 ■ Communication 通訊 ■ Import/Export traders 出入口貿易 ■ Education 教育 ■ Jewellery/Precious metals/Art dealers 珠寶/貴金屬/藝術品經銷商 ■ Hotel/Boarding houses 酒店/旅館 ■ Pharmaceutical industry 藥業 ■ Personal/Household services 個人/家庭服務 ■ Real estate 地產 ■ Others 其他 (please specify 請註明: ■ Sales/Rental of vehicles & equipment 車輛及相關設備銷售/租借 ☐ Textile business 紡織業 ■ 7. Change of source of fund 更改資金來源

Personal savings 個人儲蓄

月提取金額

HKD港幣.

Sale of an asset 出售資產 (e.g. property 例如物業)

Others 其他 (please specify 請註明:

■ Earning from work 工作薪金

■ Investment return/Investment matured 投資回報/投資到期

■ 8. Change of expected monthly contribution 更改預期每月供款

Inheritance 遺產承繼

HKD 港幣

☐ 9. Change of expected monthly withdrawal amount 更改預期每

C. Declaration and authorisation 聲明及授權書

此聲明及確認本人在本表格上提供的資料均屬正確及完整。
gree to abide by the rules stated herein. 已細閱及明白此表
Date 日期 not be processed. 此簽名須與你之前遞交予我們的式樣相同,否

D. Direct debit authorisation 直接付款授權書

Name of party to be credited (The Beneficiary) 收款的一方(受益人)

HSBC Provident Fund Trustee (Hong Kong) Limited

I/We hereby authorise my/our below-named Bank to effect transfers from my/our account to that of the above-named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker from time to time. 本人(我們)現授權本人(我們)的下述銀行,(根據受益人或其往來銀行不時給予本人(我們)銀行的指示)自本人(我們)的戶口內轉賬予上述受益人。

I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us. 本人(我們)同意本人(我們)的銀行 毋須證實該等轉賬通知是否已交予本人(我們)。

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s). 如因該等轉脹而令本人(我們)的戶口出現透支(或令現時的透支增加),本人(我們)願共同及個別承擔全部責任。

I/We confirm that my/our signature(s) on this authorisation form is/are the same as that/those for the operation of my/our savings/current account to be debited for the transfer. 本人(我們)確認,本人(我們)於本授權書上的簽名,與本人(我們)的儲蓄/往來戶口的簽名完全相同。

I/We agree to notify the above-named beneficiary of any change of bank account or cancellation of payment method and further agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, my/our Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may levy the usual charge to be paid by me/us. 本人(我們)同意給予受益人任何更改銀行戶口或取消付款方法的通知,並且同意如本人(我們)的戶口並無足夠款項支付該等授權轉賬,本人(我們)的銀行有權不予轉賬,且銀行可向本人(我們)收取慣常的費用。

This authorisation shall have effect until further notice. 本授權書將繼續生效直至另行通知為止。

I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to my/our Bank shall be given at least 10 working days prior to the date on which such cancellation/variation is to take effect. 本人(我們)同意,本人(我們)取消或更改本授權書的任何通知,須於取消/更改生效日最少10個工作天前交予本人(我們)的銀行。

I/We hereby authorise HSBC Provident Fund Trustee (Hong Kong) Limited, to initiate and arrange for contributions to be debited from my/our bank account according to the following specification, in favour of HSBC Provident Fund Trustee (Hong Kong) Limited. 本人(我們)現授權 HSBC Provident Fund Trustee (Hong Kong) Limited. 從本人(我們)下述銀行的戶口內,提出及安排扣除供款,以支付予 HSBC Provident Fund Trustee (Hong Kong) Limited。

1.	Bank	and brai	nch name 🛚	银行及分行	· 名構										
Bar	nk no	銀行編号		Branch r	 no. 分行編	號	Account	no to	be debited 扣	数戶口號碼	(Please sn	ecify accou	ınt suffix n	umber for i	ntegrated
Dai	1101	29C 3 ///// 3	,,,,	Brancin	10. 75 1 Mills	300	account.	如戶	口屬於綜合理	財戶口,	請註明戶口	字尾號碼	·)	arribor for f	nogratou
2.	Deta Bank	ils of acc c. 如有疑	count holde 問,請聯約	r as on Sta 各你的相關	tement/Pa 銀行。)	issbook 戶	口持有人	於結員	單/存摺上的:	資料紀錄(If you are	in doubt, p	olease con	tact your re	espective
				戶口持有人		A		÷= +-	Signature of	account ho	older 戶口扌	寺有人簽署	2 1		
		it be sam 相符)	e as the na	me stated i	in Section	AI 必須與	· AI 懒琪 》	易的							
	lala sa	e:e: e:		 分證明文件	+ 哈 IE										
				刃起明文F 身分證號碼			()							
				;碼				,	X						
									Date 日期						
	Ш (Others 其	他 (Please:	specify 請記	主明)										
3.	Pleas	se provid	e joint acco	unt holder's	s details (if	applicable)請填寫聰	第名戶	口持有人資料	(如適用)					
	Nam	e of joint	account ho	older聯名戶	[≦] 口持有 <i>/</i>	、姓名			Signature of	oint accou	int holder 耶	#名戶口持	有人簽署	!	
	lden:	tification	number 色:	———— 分證明文件	上號框										
				カ 啞 切 太 F 身 分 證 號 碼			()	x						
				;碼											
								_	Date 日期						
	\square	Jthers 其	他 (Please:	specify 請記	王明)			—							

Please ensure sufficient funds are available in the above bank account. 請緊記將足夠金額存入上述銀行戶口以支付有關供款。

To 致: HSBC Provident Fund Trustee (Hong Kong) Limited

c/o The Hongkong and Shanghai Banking Corporation Limited 香港上海滙豐銀行有限公司 PO Box 73770 Kowloon Central Post Office 九龍中央郵政信箱 73770 號 Hang Seng MPF Employer Direct 恒生強積金僱主專線: 2288 6822 Hang Seng MPF Service Hotline 恒生強積金服務熱線: 2213 2213

Hang Seng MPF Customer Declaration Form 恒生強積金客戶聲明書

Note 注意:

A. Customer information 客戶資料

- This declaration form is applicable for conducting regulated activities under MPFA Guidelines. 本聲明書適用於根據積金局指引訂明之受規管活動。 Please complete in BLOCK LETTERS and tick ✔ the appropriate box(es). 請用正楷填寫,並於適當的方格內加上「✔]號。
- The completed declaration form must be returned with relevant registered scheme application forms, accrued benefit transfer forms, any forms about Flexi-Contributions or Tax Deductible Voluntary Contributions to the Administrator The Hongkong and Shanghai Banking Corporation Limited. 請把填妥的聲明書連同有關參加註冊計劃申請表格,累算權益轉移表格,任何關於靈活供款表格或可扣稅自願性供款表格一併寄交行政管理人 香港上海滙豐銀行有限公司。

1. Customer name 客戶名稱		
2. HKID no./Passport no. 身分證號碼/護照號碼	3. BR or Cl no. 商業登記證或公司註冊號碼 (if applicable 如適用)	4. MPF membership number 強積金成員編號 (if applicable 如適用)
5. Industry Type 行業類別	6. Education Level 教育程度 ☐ Secondary or above 中學或以上	☐ Primary or below 小學或以下
B. Clients with special needs 需要特別照顧額	\$ 户	
According to the Guidelines on Conduct Requirem Fund Schemes Ordinance (Cap. 485), a MPF register ('vulnerable clients') during the sales and marketing a person who is not, or may not be, able to fully unbe, able to make that key decision. Such clients may visually or otherwise impaired in a manner that affect purpose refers to one of the following decisions: (a) choosing a particular Constituent Fund; (b) making a transfer that would involve a transfer (c) making an early withdrawal of accrued benefits (d) making how much voluntary contributions into 根據《強制性公積金計劃條例》(第485章)第6H條發於戶,在進行與作出重要決定有關的銷售及推銷程序時,及討論的資料的人士,或是指不能作出該重要決定或也以下程度的人士,以及因視障或有其他障礙而令其獨立(a) 選擇某一特定的成分基金: (b) 因轉移而涉及轉出保證基金: (c) 從強積金制度提早提取累算權益:或 (d) 向某一特定註冊計劃或某一特定成分基金作出多少□ Not applicable. The above content does not applicable. The above content does not applicable.	ared intermediary should provide extra care of, g process relating to the making of a key decision of a guaranteed fund; from the MPF System; or a particular registered scheme or a particular C出的《註冊中介人操守要求指引》,註冊中介人進須給予額外的照顧和支援。需要特別照顧的客戶,許不能作出該重要決定的人士。這些需要特別照於工作出有關重要決定的能力受到影響的人士。重要的關於工作的。	and support for, clients with special needs sion. A vulnerable client for this purpose is d and discussed or who is not, or may not rel of education i.e. primary level or below, sion independently. A key decision for this onstituent Fund. 公司 the state of the state
C. Witness arrangement and Reflection pe 特別照顧的客戶」) (Please tick (i) or (ii) below and either one box or bot		•
(i) ☐ I have a friend / relative who does <u>not</u> fall in 別的朋友/親友作為本人同伴參與見證此銷售	nto the above categories as companion to with	
見證人姓名 見證人身	ssport no. of witness 分證/護照號碼 Signature of witness 見證人簽署	Date signed 簽署日期
	·分證/護照號碼 見證人簽署	簽署日期
見證人姓名 見證人身 and/or 及/或 □ I agree the MPF Intermediary to invite an ad 位額外恒生銀行職員參與見證此銷售過程。	グ語/護照號碼 見證人簽署 dditional Hang Seng Bank staff to witness this send to	簽署日期
見證人姓名 見證人身 and/or 及/或	R D D D D D D D D D D D D D D D D D D D	簽署日期 sales process. 本人同意強積金中介人邀請一 Date signed
見證人姓名 見證人身 and/or 及/或 □ I agree the MPF Intermediary to invite an ad 位額外恒生銀行職員參與見證此銷售過程。 ————————————————————————————————————	D證/護照號碼 見證人簽署 Idditional Hang Seng Bank staff to witness this staff to witness this staff to witness this staff to witness the staff 職員簽署 Idditional Hang Seng Bank staff to witness the propersonal information to other parties and confi	簽署日期 sales process. 本人同意強積金中介人邀請一 Date signed

D	Transferring out of Guaranteed Funds 轉出保證基金
	I understand that if the transfer of the accrued benefits would result in a transfer out of a guaranteed fund, it may cause some or all of the guarantee conditions not being satisfied, thus resulting in the loss of the guarantee. I understand that I am being advised to check the offering document of the original scheme or consult the approved trustee for details before transferring out of the guaranteed fund. 本人明白若此轉移會導致本人從保證基金轉出累算權益,可能會因未能符合部分或全部的保證條件而導致喪失保證。本人明白強積金中介人的建議,應先行查閱原有計劃的要約文件,或向核准受託人查詢詳情後,才從保證基金轉出累算權益。 Not applicable, this application is not relating to any transferring out of Guaranteed Funds. 不適用,本申請與任何從保證基金轉出累算權益無關。
E.	Declaration and signature 聲明及簽署
l a (a) (b)	gree and confirm that during the sales process, the MPF Intermediary has NOT 本人同意及確認在銷售過程中,強積全中介人沒有:extended an invitation or inducement to me that involves the choice of a particular Constituent Fund within the Hang Seng MPF scheme (HSMPF) 邀請或誘使本人作出 關乎在自生资格全計劃內集成多基金的通程,given any regulated advice/opinion to me that involves the choice of joining the HSMPF, choosing a particular Constituent Fund, making contribution to HSMPF, or transfer of MPF accrued benefits; or join 本人提供并证明的工作。如果我们是有一个工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作,这个工作的工作的工作,这个工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作的工作的工作,这个工作,这个工作,这个工作,这个工作,这个工作,这个工作,这个工作,这个
I —	gnature of customer 客戶簽署 —
E	Return postal address 回郵地址
(N th PI cc (P	ote: This part must be completed ONLY if your application is made through the sales and marketing activities conducting by the MPF intermediary. 註:只適用於當你的申請是透過強積金中介人的銷售及推銷活動所進行,此部分必須填寫。) ease fill in your name and return postal address, and check to ensure their correctness. The information of this part is used for posting the py of this form to you only. 請填寫你的姓名及回郵地址並確保填寫正確無誤。此部分的資料僅供用作寄回本表格的副本予你。 ease complete in BLOCK letters 請用正楷填寫) amme : 名

For office	CDD	Staff name 1	SID	BCC	Programme code	Reference code
use only 公司專用	Pre-checked ETB	Staff name 2 - referror	RID	BCC		