

**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  
or place to the MPF drop-in box at designated Hang Seng Bank branches  
或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



HAY1

**HANG SENG MANDATORY PROVIDENT FUND**  
**AUTHORISED SIGNATURES SPECIMEN (EMPLOYER)**  
**恒生強積金: 授權人簽名式樣(僱主)**

**Note 注意:**

- Please complete in CAPITAL and BLOCK LETTERS. 請用大楷及正楷填寫。
- 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:
  - 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。
- 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](http://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](http://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. DETAILS OF SCHEME 計劃資料**

1. Employer ID 僱主編號	2. Pay centre ID 付款中心編號	3. Effective date 生效日期 <table border="1"><tr><td>Year 年</td><td>Month 月</td><td>Day 日</td></tr></table>	Year 年	Month 月	Day 日
Year 年	Month 月	Day 日			
4. Company name of participating employer 參與僱主公司名稱					

**B. AUTHORISED INSTRUCTION 授權指示**

Newly added authorised personnel 新增之授權人士								
Full Name 全名 (same as that shown on your HKID card/Passport 與香港身分證/護照上的姓名相同)								
Other name (in English) (if any) 別名(英文)(如有)								
Date of birth 出生日期	<table border="1"><tr><td>Year 年</td><td>Month 月</td><td>Day 日</td></tr></table>	Year 年	Month 月	Day 日	<table border="1"><tr><td>Year 年</td><td>Month 月</td><td>Day 日</td></tr></table>	Year 年	Month 月	Day 日
Year 年	Month 月	Day 日						
Year 年	Month 月	Day 日						
Nationality (Country/Region) 國籍(國家/地區)								
HKID card/Passport no. 香港身分證/護照號碼 (please provide a certified true copy 請附上認證副本)								
Passport number should be given if you do not possess a valid HKID card. 在沒有有效的香港身分證情況下才填寫護照號碼。								
Position 職銜								
Residential address (The main address the majority of the time is spent or resided) (in English) 住宅地址(大部分時間居住在這個主要地址)(英文)	City 城市 _____ Country/Region 國家/地區 _____	City 城市 _____ Country/Region 國家/地區 _____						
Specimen signature 簽署式樣	X	X						

**B. AUTHORISED INSTRUCTION (CONT'D) 授權指示(續)**

<b>Cancellation of authorised personnel 終止之授權人士</b>		
Full Name 全名(same as that shown on your HKID card/Passport 與香港身分證／護照上的姓名相同)		
Position 職銜		

**C. DECLARATION AND AUTHORISATION 聲明及授權書**

This form should be signed by an authorised person with his/her signatory previously submitted to The Hongkong and Shanghai Banking Corporation Limited. Otherwise, please send us supporting documents and specify reason in below. 本表格須由已於早前向香港上海滙豐銀行有限公司提交其簽名式樣之授權人士簽署。否則，請遞交證明文件及於下列註明原因。

Reason 原因 \_\_\_\_\_

(a) I/We confirm that the identities of the above newly added authorised personnel had been verified and the information given in the form is correct and complete. 本人／吾等確認上述新增之授權人士的身分已被核實和本表格所提供的資料為正確及完整。

(b) I/We have read and understood the full details of this form (including the Notes on this form) and agree to abide by the rules stated herein. 本人／吾等已細閱及明白此表格內的所有內容(包括此表格上的注意部分)，並同意遵守此述的規則。

<p><b>X</b> _____          Authorised signature of employer 僱主授權簽署</p> <p>_____</p> <p>Full name 全名</p> <p>_____</p> <p>Position 職銜</p> <p>_____</p> <p>Date 日期</p>	<p><b>X</b> _____          Authorised signature of employer 僱主授權簽署</p> <p>_____</p> <p>Full name 全名</p> <p>_____</p> <p>Position 職銜</p> <p>_____</p> <p>Date 日期</p>
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