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 或

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



HA05

HANG SENG MANDATORY PROVIDENT FUND CHANGE OF EMPLOYER DETAILS FORM 恒生強積金: 更改僱主資料表格

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。
- 2. If you need to add or delete the signature specimen of your authorised person(s), please complete an 'Authorised Signatures Specimen' form (HAY1). 如你需要新增或終止授權人簽名,請另行填寫「授權人簽名式樣」表格 (HAY1)。
- 3. Please provide the business and/or correspondence address proof (if applicable). 請提供營業及/或通訊地址證明(如適用)。
- 4. 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。
- 5. Your written instruction will normally be processed within five business days after the administrator of Hang Seng MPF scheme receives your properly completed form. This processing time is for reference only. Your instruction will be processed as soon as possible. 你在表格上的指示一般會在恒生強積金計劃行政管理人收到你填妥的表格後五個工作天內處理。有關處理時間僅供參考。你的指示將會盡快被處理。
- 6. 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 或強積金熟線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。

2. Effective date of change 更改生效日期

A. DETAILS OF SCHEME 計劃資料

Employer ID 僱主編號

2		夕稲			Year 年	Month 月 Day	H		
J.	3. Company name of participating employer 参央僱主公司有悟								
В.	CHANGE DETAILS OF SCHEME 更改計劃資料 料。)	(Please complete only	those deta	ils to be ch	anged. 🧏	只需填寫所需	更改的資		
1.	. Change of preferred language for correspondence	更改通訊的語言 🔲 🛭	English 英文	Chinese	中文				
	2. Change of company name 更改公司名稱								
Inc	Please notify us within 30 days for the change of company name and provide a certified true copy of valid Business Registration Certificate and/or Certificate of Incorporation on Change of Name and/or other relevant registration documents. If change the registration type and registration number, a new employer scheme may be required to set up. 請於公司名稱更改後的30天內通知我們,並請提供有效的商業登記證及/或公司註冊更改名稱證書及/或其他有關的登記證之認證副本。如更改註冊類別及註冊號碼,新的僱主計劃可能需要重新設立。								
a.	a. New company name of participating employer 參與僱主之新公司名稱								
	English name 英文名稱:								
	Chinese name 中文名稱:								
b.	. New Business Registration/Certificate of Incorporation no. ¹ 新商業登記/公司註冊證書號碼 ¹	「Registration types are list should be given only if yo 商業登記證的情況下, BR - Business Registratio	ou do not prod 才可填報其他	ess a Business	Registrat				
		IR - Inland Revenue Dep		itable Organisa	ations) 税 Ā	務局(慈善機構)	1		
	Registration Registration no. types 登記號碼	ED - Education Departme SO - Society Office of HK		iocl	虑社園車				
	註冊證明	TU - Registry of Trade Un			处江西于	777 100 (11 12)			
		OT - Others 其他							
3.	3. Change of trading as name(s) 更改營業名稱 (Please provide a certified true copy of evidence. 請提供證明文件之認證副本。)								
	English name 英文名稱:								
	Chinese name 中文名稱:								

	CHANGE DETAILS OF SCHEME (CON Change of contact information 更改聯絡資	* *7					
r .	Please tick √ if you want to apply bel		information to e	xisting pay cent	re(s). 如欲¦	将以下資料同時更改	女為現有付款中心的
	一 聯絡資料,請於方格內加上[√]號。 Business address (in English) 營業地址(英文) (as shown on Business Registration/Certificate of Incorporation 必須與商業登記/公司註冊證書相						
	同)	(40 0.10 1111 0.	2 40200 1.109.01.		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Room/Flat 室 Floor 樓 Bloo	 ck 座	Name of building	大廈名稱			
		,		/ (
	Name of estate 屋邨名稱 Number and name of street/road 門牌號碼及街道名稱						
	Name of contact person 聯絡人姓名				c. Pos	sition of contact pers	on 聯絡人職銜
	☐ Mr 先生	1			.		
	Ms 女士 Surname 姓氏		Given name	;名字			
_		Country/Re	egion code	Area code		Phone no.	
		國家/區均	或編 號	地區號碼		電話號碼	
	Day time contact no. ² 日間聯絡電話 ²						
_	Mobile phone no.² 流動電話號碼²						
	Email address³ 電郵地址³ you are providing overseas contact details outside H						
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Given name 名字

c. Name of contact person 聯絡人姓名

Surname 姓氏

☐ Mr 先生 ☐ Ms 女士 d. Position of contact person 聯絡人職銜

C.	CHANGE DETAILS OF PAY CENTRE (C	CONT'D) 更改付款中心	い資料(續)					
		Country/Region code 國家/區域編號	Area code 地區號碼	Phone no. 電話號碼				
e.	Day time contact no.² 日間聯絡電話²							
f.	Mobile phone no.² 流動電話號碼²							
g.	Email address³ 電郵地址³							
2.	Change of the instruction for distributing t	he relevant MPF docum	ents to employee 更	收分發相關強積金法例文件 :				
	Please make <u>ONE</u> choice below and tick ✓ the 列其中 <u>一項</u> 選擇,並於適當的方格內加上「✓				e changed. 請作出下			
	□ Pursuant to section 143A(1)(c) of the Mandatory Provident Fund Schemes (General) Regulation, I/we hereby provide our consent for us to distribute the relevant MPF documents (including but not limited to Notice to Participation of employees together with scheme information related to the above scheme, member benefit statement of employee and notice about change of business particulars of the trustee or changes to the procedure related to making payment of voluntary contributions) as required under the MPF legislation to the employees who have not provided you with a valid address. I/We understand that I am/we are obliged to ensure that such MPF documents will be distributed to these employees within 7 working days after receiving the documents from you. 根據強制性公積金計劃(一般)規則第143(A)(1)(c)條,本人/吾等特此同意向沒有提供有效地址的僱員分發相關強積金法例文件(包括但不限於僱員的參與通知及有關於以上計劃的資料、強積金成員權益報表、有關信託人業務詳情的改變或有關自願性供款的支付作出改變的程序的書面通知)。本人/吾等明白有責任確保在收到文件後的7個工作天內,將這些強積金文件轉交給有關僱員。							
	Pursuant to section 143A(1)(c) of the Mandatory Provident Fund Schemes (General) Regulation, I/we would like to revoke the consent give previously for us to distribute the relevant MPF documents (including but not limited to Notice to Participation of employees together with schem information related to the above scheme, member benefit statement of employee and notice about change of business particulars of the trust or changes to the procedure related to making payment of voluntary contributions) as required under the MPF legislation to the employees where not provided you with a valid address. 請撤銷本人/吾等先前根據強制性公積金計劃(一般)規則第143(A)(1)(c)條給予向沒有提供有地址的僱員分發相關強積金法例文件(包括但不限於僱員的參與通知及有關於以上計劃的資料、強積金成員權益報表、有關信託人務詳情的改變或有關自願性供款的支付作出改變的程序的書面通知)的同意。							
3.	Change of MPF contribution overpayment	instruction 更改強積金額	多繳供款處理指示					
	(only applicable for contributions by chequ	ue and uninvested overp	aid contributions 只到	適用於以支票作供款及未被 找	设資的多繳供款)			
	Refund overpaid contributions 退還多紅 The uninvested overpaid contributions will I		皮投資的多繳供款將以	人支票银環				
	Offset future contributions and/or cont	ribution surcharges 抵銷	肖將來供款及/或供 款	で附加費				
	If the amount on the cheque falls short of the related total contribution amount and/or surcharge amount from the related remittance statement are or discrepancy bill, the accumulated uninvested overpaid contribution (if any) will be used to settle the shortfall by the administrator of the scher for offsetting future contributions and/or contribution surcharges. 如支票上的款額不足以支付有關付款結算書及/或差額賬單的有關總供額及/或供款附加費時,已累積的未被投資的多繳供款(如有)將會被計劃行政管理人用以抵銷將來供款及/或供款附加費。							
4. Preprinted paper remittance statement 郵寄預印付款結算書 Receive the preprinted paper remittance statement 收取郵寄預印的付款結算書 ☐ Yes 是 ☐ No 否								
3	If you are providing overseas contact details outside H numbers, usually there is no need to add an Area Code 的海外聯絡資料,請包括正確的國家/區域及地區If you are an employer who has already provided author limited to submitting/receiving electronic contribution address for the above-mentioned purposes, please corensure the contribution will be processed timely, please any change of email address. 如你是已向恒生強積金計子確認書及/或所有強積金相關的服務,並想將新款能被及時處理,若電郵地址有任何更改,請於供於	and you may check with your i 編號:然而,海外手提電話號 rised email address(es) to the a files and electronic acknowle mplete and submit the 'Author e be reminded to notify the ad 計劃行政管理人提供其授權 電郵地址也登記於上述的用	telecommunications servic 虎碼一般毋須加上地區編 idministrator of Hang Seng idgement and/or all MPF rised E-mail address for Ele ministrator of Hang Seng I 電郵地址的僱主以作聯編 途,請填寫及遞交「用作	re provider for details. 如你所提供 號,詳情請向你的電訊服務供應 MPF scheme for communication I related services and would also like ectronic Communication (Employe MPF scheme 10 working days befo 強訊之用,包括但不限於遞交。	的是香港特別行政區以约 應商查詢。 purposes including but no ke to register a new ema r)' form (HAYC) as well. T ore the contribution day fo /接收電子供款檔案及電			
D.	DECLARATION AND AUTHORISATION							
1.	I/We confirm that the information given in the fo	orm is correct and complet	e. 本人/吾等確認本:	表格所提供的資料為正確及另	完整。			
2.	2. 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。							
X			X					
(Th	ithorised signature of employer 僱主授權簽署4 iis signature must be the same as your previous specim 表格可能不獲處理。)	en submitted to us. Otherwise	•	f employer⁴ 僱主授權簽署⁴ cessed. 此簽名須與你之前遞交予	我們的式樣相同,否則			
Fu	II name 全名		 Full name 全名					
- Po	sition 職銜		 Position 職銜					
			124 1-4					

Date 日期

Date 日期

If you wish to make changes under Section C 'CHANGE DETAILS OF PAY CENTRE', the authorised signatory of the related pay centre specified in Section C has to sign the form. Otherwise, the change request in Section C may not be processed. 如你欲更改C部「更改付款中心資料」,請用C部所指的有關付款中心的獲授權人士簽署本表格,否則C部的更改指示可能不獲處理。