

**Employee / Self-employed Person / Personal Account Holder (“Applicant”)  
Application of Participation Form for BCOM Joyful Retirement MPF Scheme (“Scheme”)**

僱員 / 自僱人士 / 個人帳戶持有人 (“申請人”)

For trustee use only

**交通銀行愉盈退休強積金計劃 (“本計劃”) 參與表格**

This Application of Participation Form may only be issued in conjunction with the Principal Brochure and the On-going Cost Illustrations of the Scheme.  
此參與表格必須連同本計劃之主體冊子及持續成本列表一併派發。

**Part I: Details of Applicant 第一部：申請人資料**

1. Name of Applicant (must be same as HKID/Passport) 申請人姓名 (須與香港身份證/護照相同) English 英文 \_\_\_\_\_ Chinese 中文 \_\_\_\_\_
2. Nationality 國籍  Chinese – Hong Kong 中國 – 香港  Others 其他 \_\_\_\_\_
3. HKID Card No. / Passport No. 香港身份證/護照號碼 \_\_\_\_\_
4. Date of Birth (dd/mm/yyyy) 出生日期 (日/月/年) \_\_\_\_\_
5. Sex 性別  Male 男  Female 女

(Please enclose a copy of your HKID/Passport for verification purpose. 請附上閣下之香港身份證/護照副本以作核對之用。)

6. Date of Employment (for employee) / Date of SEP Commencement (for Self-employed person) 受聘日期 (僱員適用) / 開始自僱日期 (自僱人士適用) (dd/mm/yyyy) (日/月/年) \_\_\_\_\_
7. Telephone No 電話號碼 (i) \_\_\_\_\_ (ii) \_\_\_\_\_  
手提電話號碼 Mobile Phone No. 住宅電話號碼 Residential Telephone No.

8. Email Address 電郵地址 \_\_\_\_\_ (為方便接收電子訊息建議填寫 Suggest to fill in this item for receiving e-mail)

9. Residential Address 住址 Note: P.O.Box will NOT be accepted. 註: 郵政信箱恕不受理 \_\_\_\_\_

10. Correspondence Address 通訊地址 Note: Please complete if different from above residential address 註: 如與上述住址不同才須提供 \_\_\_\_\_

11. Category of Members 成員類別 (Please tick ✓ where appropriate 請在適用處加✓)  
 Casual employee 臨時僱員  Full-time employee 全職僱員  Self-employed Person 自僱人士  Personal Account Holder (Please go to Part II) 個人帳戶持有人 (請跳至第二部)

12. Commencement date of the first contribution period for which Mandatory Contributions will be paid to this Scheme 向本計劃支付強制性供款第一個供款期之首日 (dd/mm/yyyy 日/月/年) \_\_\_\_\_

The amount of Mandatory Contributions shall be in accordance with the prescribed percentage as specified in section 7A of the Mandatory Provident Fund Schemes Ordinance (“MPF Ordinance”) from time to time. 強制性供款金額須按強制性公積金計劃條例 (“強積金條例”) 第7A條內於任何時候所指定的百分比來計算。

13. Frequency of Payment 供款周期 (Please tick ✓ where appropriate 請在適用處加✓)

All Contributions will be made and payable in the following manner: 所有供款之供款周期為：

| (Employee 僱員)   | (Self-employed Person 自僱人士)  |
|---|--|
| <input type="checkbox"/> Monthly and the contribution period is 每月而供款期為<br><input type="checkbox"/> From the 1 <sup>st</sup> day to the last day of each calendar month 每個曆月之第一日至該月之最後一日<br><input type="checkbox"/> From _____ day of a month to _____ day of next month 每月之第 _____ 日至翌月之第 _____ 日 | <input type="checkbox"/> Monthly and the contribution period is 每月而供款期為<br><input type="checkbox"/> From the 1 <sup>st</sup> day to the last day of each calendar month 每個曆月之第一日至該月之最後一日<br><input type="checkbox"/> Annually 每年 |
| <input type="checkbox"/> Bi-weekly 每月2星期 <input type="checkbox"/> Weekly 每星期 <input type="checkbox"/> Daily 每日  |  |

14. Name of Employer 僱主名稱 (For employee only) (只適用於僱員) \_\_\_\_\_

15. Business Registration No. 商業登記號碼 (For Self-employed person only) (只適用於自僱人士) \_\_\_\_\_

**Part II: Investment Choice 第二部：投資選擇**

16. The below Investment Choice is applicable to contributions and transfer-in monies (if applicable). For the case of transfer-in within the same scheme by unit transfer, that existing investment choice of the transfer-in portion will remain unchanged. 下列投資選擇適用於供款及轉入款項(如適用)。如屬本計劃內轉移的基金單位，該轉入部分之現有投資選擇將維持不變。

| Code 編號                           | Name of Constituent Fund 成分基金名稱                        | The minimum allocation % in any constituent fund selected must not be less than 10% (whole number), and the total for all funds selected must be added up to 100%. 在所選擇的任何成分基金中投資額所佔的最低百分比不得少於10%(整數)，而所選擇的總成分基金的投資額百分比總數必須為100%。 |
|-----------------------------------|--|---|
| 01                                | BCOM MPF Conservative Fund 交通銀行強積金保守基金                 | %   |
| 02                                | BCOM Guaranteed (CF) Fund 交通銀行保證回報成分基金                 | %   |
| 06                                | BCOM Stable Growth (CF) Fund 交通銀行平穩增長成分基金              | %   |
| 07                                | BCOM Balanced (CF) Fund 交通銀行均衡成分基金                     | %   |
| 08                                | BCOM Dynamic Growth (CF) Fund 交通銀行動力增長成分基金             | %   |
| 09                                | BCOM Asian Dynamic Equity (CF) Fund 交通銀行亞洲動力股票成分基金     | %   |
| 10                                | BCOM Hong Kong Dynamic Equity (CF) Fund 交通銀行香港動力股票成分基金 | %   |
| 11                                | BCOM China Dynamic Equity (CF) Fund 交通銀行中國動力股票成分基金     | %   |
| 12                                | BCOM HSI Tracking (CF) Fund 交通銀行恒指成分基金                 | %   |
| 13                                | BCOM Global Bond (CF) Fund 交通銀行環球債券成分基金                | %   |
| 14                                | BCOM Greater China Equity (CF) Fund 交通銀行大中華股票成分基金      | %   |
| Total Percentage Allocated 總百分比分配 |  | 100%  |

The Investment Choice specified by the Applicant will apply to both his/her own contributions and the Employer's contributions. If you do not specify the Investment Choice in the above column, or incomplete or invalid specification of Investment Choice is made, the future contributions and transfer-in monies received (if applicable) to the respective account will be invested in the BCOM Stable Growth (CF) Fund. 申請人的投資選擇適用於他/她自己的供款及僱主的供款。如申請人並沒有就此帳戶於上列填上投資選擇，或所填之投資選擇不完整或不正確，則此帳戶日後收到之所有供款及轉入款項(如適用)將投資於交通銀行平穩增長成分基金。

### Part III: Fees and Charges

Please refer to the Principal Brochure for details.

### Part IV: Personal Data Collection Statement

- Personal data supplied by customers and Participating Employers of the Scheme and details of transactions or dealings by such customers will only be accessed and handled by Bank of Communications Trustee Ltd. ("the Company"). Failure to supply such data may result in the Company unable to open or continue accounts or provide services. The Company may, where it considers necessary or appropriate, provide such data to the following parties (whether within or outside Hong Kong) for the purposes set out in item 2 below: (i) any agent, contractor or third party service provider who provides administrative, telecommunication, computer or other services to the Company in connection with the operation of its MPF business; (ii) Bank of Communications Co., Ltd ("BOCOM")'s group companies or its agent; (iii) any other person under a duty of confidentiality to the Company which has undertaken to keep such information confidential; (iv) any bank, financial institution or other institution with which the customers have or propose to have dealings; (v) any government authorities or regulatory bodies in any jurisdiction; and (vi) any actual or proposed assignee of the Company.
- The personal data relating to a customer may be used for the following purposes: (i) opening, administering and continuation of the customer's account; (ii) the daily operation of the services provided to the customer; (iii) designing services or products for the customer's use; (iv) updating and/or verifying customers' personal information that may be held by BOCOM's group companies or its agent; (v) conducting matching procedures; (vi) complying with applicable legal, governmental or regulatory requirements for making disclosure; (vii) enabling any actual or proposed assignee of the Company to evaluate the intended transaction; and (viii) all other incidental and associated purposes relating thereto. The usages of such data will at all times be governed by the provisions of the Personal Data (Privacy) Ordinance ("PDP Ordinance") and Mandatory Provident Fund Schemes Ordinance.
- Customer's data may be used in direct marketing and the Company requires the customer's consent (which includes an indication of no objection) for that purpose. In this connection, please note that:
  - the name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data of a customer may be used in direct marketing;
  - the following classes of services, products and subjects may be marketed:
    - MPF, retirement schemes and related services and products;
    - financial, insurance, trust, custody, credit card, banking and related services and products;
    - reward, loyalty or privileges programmes and related services and products; and
    - donations and contributions for charitable and/or non-profit making purposes;
  - the above services, products and subjects may be provided or (in the case of donations and contributions) solicited by the Company and/or:
    - BOCOM's group companies;
    - third party financial institutions, insurers, trust companies, credit card companies, securities and investment services providers;
    - third party reward, loyalty, co-branding or privileges programme providers; and
    - charitable or non-profit making organizations;
  - in addition to marketing the above services, products and subjects itself, the Company also intends to provide the data described in paragraph (3)(i) above to any of the persons described in paragraph (3)(iii) above for use by them in marketing MPF and related services and products only, and the Company requires the customer's written consent (which includes an indication of no objection) for that purpose;
  - The Company would not provide the data described in paragraph (3)(i) above to any of the persons described in paragraph (3)(iii) above for use by them in marketing non-MPF services or products.If a customer does not wish the Company to use or provide to other persons his data for use in direct marketing as described above, the customer may exercise his opt-out right by notifying the Company or tick the following box.  
 I do not wish my personal data being used in direct marketing.
- The person to whom requests for access to data or correction of data, please write to the Data Protection Officer, Bank of Communications Trustee Limited, 1/F., Far East Consortium Building, 121 Des Voeux Road Central, Hong Kong. In accordance with the terms of the PDP Ordinance, the Company has the right to charge a reasonable fee for the processing of any data access request.

### 第三部：費用及收費

詳情請參閱主體冊子。

### 第四部：個人資料收集聲明

- 本計劃客戶及參與僱主所提供的個人資料及該等客戶的交易或事務往來的詳情僅供交通銀行信託有限公司(「本公司」)使用及處理。若未能向本公司提供有關資料,可能會導致本公司無法開立、管理及延續戶口或提供服務。另在本公司認為有需要或適當時,或會將該等資料提供予下列各方(不論在香港境內或境外)作以下第2項所述的用途:(i)就強積金業務運作向本公司提供行政、電訊、電腦或其他有關服務的任何代理人、承包商或第三方服務供應商;(ii)交通銀行集團成員公司或其代理人;(iii)對本公司有保密責任且已承諾將該等資料保密的任何其他人士;(iv)客戶與之進行或擬與之進行交易的任何銀行、金融機構或其他機構;(v)任何司法管轄區的政府機關或監管機構;及(vi)本公司之實際或建議承讓人。
- 客戶的資料可能會作下列用途:- (i)開立、管理及延續客戶之戶口;(ii)為提供服務予客戶之日常運作;(iii)為客戶設計服務或產品;(iv)更新及/或核實由交通銀行集團成員公司或其代理人所持有的客戶個人資料;(v)進行配對程序;(vi)遵守適用之法律、政府或監管規定而作出披露;(vii)促使本公司之實際或建議承讓人審核擬進行的交易;及(viii)所有其他相關之目的。而該等資料之運用將會受制於個人資料(私隱)條例(「私隱條例」)及強制性公積金計劃條例。
- 客戶的資料可能會用於直接促銷,而為此須獲得客戶同意(包括表示不反對)。就此請注意:
  - 客戶的姓名、聯絡資料、產品及服務組合資料、交易模式及行為、財務背景及人口統計數據可用於直接促銷;
  - 可用作促銷下列類別服務、產品及促銷標的:
    - 強積金、退休計劃及相關服務及產品;
    - 財務、保險、信託、託管、信用卡、銀行及相關服務及產品;
    - 獎賞、客戶或會員或優惠計劃及相關服務及產品;及
    - 為慈善及/或非牟利用途的捐款及捐贈;
  - 上述服務、產品及促銷標的的可能由本公司及/或下列各方提供或(就捐款及捐贈而言)徵求:
    - 交通銀行集團成員公司;
    - 第三方金融機構、保險公司、受託人公司、信用卡公司、證券及投資服務供應商;
    - 第三方獎賞、客戶或會員、合作品牌或優惠計劃提供者;及
    - 慈善或非牟利機構;
  - 除由本公司促銷上述服務、產品及促銷標的以外,本公司亦擬將以上3(i)段所述的資料提供予以上3(iii)段所述的任何人士,只供該等人士在促銷強積金及相關服務及產品中使用,而為此用途須獲得客戶書面同意(包括表示不反對)。
  - 本公司不會將以上3(i)段所述的資料提供予以上3(iii)段所述的任何人士促銷非強積金服務或產品。如客戶不希望本公司如上述使用其資料或將其資料提供予其他人士作直接促銷用途,客戶可通知本公司行使其選擇權拒絕促銷或於以下方格加上“✓”號。  
 本人不希望本人的個人資料被用作直接促銷。
- 如客戶要求查閱或更改其個人資料,可致函香港中環德輔道中121號遠東發展大廈一樓交通銀行信託有限公司資料保護主任。根據私隱條例,本公司有權就處理任何查閱個人資料的要求收取合理費用。

### Part V: Important Information

- The Company can record all or any telephone conversation(s) between clients and the Company

### Part VI: Declaration and Acknowledgement

- I hereby acknowledged that I have read and fully understand the Principal Brochure and the On-going Cost Illustrations.
- All the information herein together with other documents in connection with this enrolment are full, complete and true.
- I will be bound by the terms and conditions of the Master Trust Deed and its Governing Rules and any amendments thereto from time to time including the fees and charges mentioned herein and undertake to comply with the same.
- I accept the responsibility for the choices I have made on this Application and acknowledge that the Company shall not be liable for any loss due to an inappropriate choice made by me.
- I understand and agree the Personal Data Collection Statement in Part IV.
- I also agree the Company to record all or any of my telephone conversation(s) with the Company.

### 第五部：注意事項

- 本公司可記錄客戶與本公司之間進行的所有或任何電話談話。

### 第六部：聲明及確認

- 本人謹此確認本人閱畢並完全明白主體冊子及持續成本列表的內容。
- 本人在此所提供所有資料及連同此表格提交之其他文件均屬正確無誤並無缺漏。
- 本人須受到集成信託契約內之條款及管限規則所約束及於任何時候,條款若有所更改(包括收費及費用),本人承諾仍會遵守有關條款。
- 本人願意承擔本人在此申請所作出之選擇之責任,並承諾公司不用承擔因本人不恰當之選擇所導致之損失。
- 本人明白及同意第四部之個人資料收集聲明。
- 本人謹此同意 貴公司可記錄本人與 貴公司之間進行的所有或任何電話談話。

Signature of Employee/Self-employed Person/Personal Account Holder

僱員/自僱人士/個人帳戶持有人簽署

Date 日期

Authorized Signature of Employer (with Company Chop) (if applicable)

僱主之授權簽署(連同公司印章)(如適用)

Date 日期

中介人專用

| 單位/機構 | 強積金中介人編號 | 核印見證 | 強積金中介人簽署 | 主管簽署 | 日期 |
|-------|----------|------|----------|------|----|
|       |          |      |          |      |    |

香港身份證副本  
HKID CARD COPY

## 計劃成員資金轉移申請表 SCHEME MEMBER'S REQUEST FOR FUND TRANSFER FORM

(適用於自僱人士、個人帳戶持有人或終止受僱的僱員)  
(for self-employed person, personal account holder or employee ceasing employment)  
《強制性公積金計劃(一般)規例》(簡稱《規例》)第145、146、147、148及149條  
Sections 145, 146, 147, 148 and 149 of the Mandatory Provident Fund Schemes (General) Regulation ("the Regulation")

|               |
|---------------|
| MPF(S) – P(M) |
|---------------|

|   |   |  |
|---|---|--|
| <b>注意:</b><br><b>Note:</b>  | 請用 <b>正楷</b> 填報本表格。填寫第MPF(S)-P(M)號表格前，請先閱讀《計劃成員轉移權益須知》及《填報須知》。在本表格提供的個人資料，將被用作處理你在本表格內要求的轉移選擇。你所提供的個人資料可能會為達致上述目的，或直接與上述目的有關的目的而轉交有關受託人、相關服務提供者、強制性公積金計劃管理局(簡稱「積金局」)，及其他相關機構。Please use <b>BLOCK LETTERS</b> for completion of this Form. Please read the "Notes to Transfer Benefits by Scheme Member" and "Explanatory Notes" before you complete Form MPF(S)-P(M). The personal data to be supplied in this Form are to be used for the purpose(s) of processing your election(s) of transfer as requested in this Form. The personal data you supply may, for the purpose(s) mentioned above or for a purpose directly related to such purpose(s), be transferred to the trustee(s) concerned, the relevant service provider(s), the Mandatory Provident Fund Schemes Authority ("MPFA") and other appropriate parties. | For Trustee Use Only                               |
| <b>第一部：計劃成員資料 Part I: DETAILS OF THE SCHEME MEMBER</b>  |   |  |
| 1) 姓名 (與香港身份證相同) <sup>註1</sup><br>Name (same as HKID card) <sup>Note 1</sup>  |   |  |
| 2) 香港身份證號碼<br>HKID Card Number  | 3) 護照號碼<br>Passport Number  | 本欄僅供沒有香港身份證的成員填寫 ONLY for member without HKID Card |
| 4) 電話號碼<br>Telephone Number   | 5) 手提電話<br>Mobile Number  |  |
| 6) 通訊地址<br>Correspondence Address   |   |  |
| <b>第二部：資金轉移資料 Part II: FUND TRANSFER INFORMATION</b> (請填寫原計劃的強積金帳戶資料。Please fill in details of the MPF account in the original scheme.)   |   |  |
| 7) 原受託人名稱 <sup>註2</sup><br>Name of Original Trustee <sup>Note 2</sup>   |   |  |
| 8) 原計劃名稱 <sup>註2</sup><br>Name of Original Scheme <sup>Note 2</sup>   |   |  |
| 9) 計劃成員帳戶號碼 <sup>註2</sup><br>Scheme Member's Account Number <sup>Note 2</sup>   | 如原計劃為「交通銀行愉盈退休強積金計劃」，請提供「計劃編號」於本欄。Please provide the "Scheme Number" in this field if the Original Scheme is "BCOM Joyful Retirement MPF Scheme".   |  |
| 10) 強積金帳戶類別<br>Type of MPF account  | 請選擇以下其中一個帳戶並於適當方格內填上✓號：<br>Please select <u>ONE</u> of the following accounts and ✓ as appropriate :<br><input type="checkbox"/> 個人帳戶 Personal Account<br>或 OR<br><input type="checkbox"/> 供款帳戶 Contribution Account  |  |
| 11) 以往受僱詳情 (適用於僱員在終止受僱後欲把供款帳戶內的累算權益轉出)：<br>Details of former employment ( <b>applicable for employee who wishes to transfer-out the accrued benefits from a contribution account after cessation of employment</b> ) :<br>前僱主名稱 Name of Former Employer : _____<br>僱主識別號碼 <sup>註3</sup> Employer's Identification Number <sup>Note 3</sup> _____  |   |  |
| 12) 自僱人士身份詳情 (只適用於自僱人士)： Details of self-employed status ( <b>applicable for self-employed person only</b> ) :<br>請說明你轉移的原因，並於適當方格內填上✓號。Please indicate your reason of transfer and ✓ as appropriate.<br><input type="checkbox"/> 終止自僱，生效日期是： Cessation of self-employment, with effect from : _____ (日/月/年 dd/mm/yyyy)<br><input type="checkbox"/> 本人將會維持自僱，並把本人的累算權益轉移至第三部第(13)項所述的另一個強積金計劃。本人向原計劃供款的最後日期是：<br>I will remain in self-employment and my accrued benefits will be transferred to another MPF scheme stated in Part III (13). Contributions to the original scheme should be paid up to : _____ (日/月/年 dd/mm/yyyy) |   |  |
| <b>第三部：轉移資金的選擇 Part III: FUND TRANSFER OPTIONS</b> (請填寫新計劃的強積金帳戶資料。Please fill in details of the MPF account in the new scheme.)  |   |  |
| 13) 本人選擇把在第二部所述帳戶內由強制性供款所產生的累算權益轉移至以下帳戶 (請在下列適用的方格內填上✓號)： I elect to transfer the accrued benefits derived from mandatory contributions in my account stated in Part II to the following account (please ✓ the appropriate box below) :<br><br><input type="checkbox"/> (a) 轉移至本人新僱主就本人開立的供款帳戶 To my contribution account with my <u>new employer</u>   |   |  |
| 新受託人名稱 <sup>註4</sup><br>Name of New Trustee <sup>Note 4</sup>   | <input type="checkbox"/> 交通銀行信託有限公司 Bank of Communications Trustee Limited<br><input type="checkbox"/> 其他，請註明 Others, please specify _____  |  |
| 新計劃名稱 <sup>註4</sup><br>Name of New Scheme <sup>Note 4</sup>   | <input type="checkbox"/> 交通銀行愉盈退休強積金計劃 BCOM Joyful Retirement MPF Scheme<br><input type="checkbox"/> 其他，請註明 Others, please specify _____  |  |
| 計劃成員帳戶號碼 <sup>註4</sup><br>Scheme Member's Account Number <sup>Note 4</sup>  |   |  |
| 新僱主名稱<br>Name of New Employer   |   |  |
| 僱主識別號碼 <sup>註3</sup><br>Employer's Identification Number <sup>Note 3</sup>  |   |  |

**計劃成員資金轉移申請表**  
**SCHEME MEMBER'S REQUEST FOR FUND TRANSFER FORM**

(適用於自僱人士、個人帳戶持有人或終止受僱的僱員)  
(for self-employed person, personal account holder or employee ceasing employment)  
《強制性公積金計劃(一般)規例》(簡稱《規例》)第145、146、147、148及149條  
Sections 145, 146, 147, 148 and 149 of the Mandatory Provident Fund Schemes (General) Regulation ("the Regulation")

(b) 轉移至本人新計劃內的指定帳戶 To my designated account in the new scheme

|   |   |
|---|---|
| 新受託人名稱 <sup>4</sup><br>Name of New Trustee <sup>Note 4</sup>              | <input type="checkbox"/> 交通銀行信託有限公司 Bank of Communications Trustee Limited<br><input type="checkbox"/> 其他，請註明 Others, please specify          |
| 新計劃名稱 <sup>4</sup><br>Name of New Scheme <sup>Note 4</sup>                | <input type="checkbox"/> 交通銀行愉盈退休強積金計劃 BCOM Joyful Retirement MPF Scheme<br><input type="checkbox"/> 其他，請註明 Others, please specify            |
| 計劃成員帳戶號碼 <sup>4</sup><br>Scheme Member's Account Number <sup>Note 4</sup> | 如新計劃為「交通銀行愉盈退休強積金計劃」，請提供「計劃編號」於本欄。 Please provide the "Scheme Number" in this field if the New Scheme is "BCOM Joyful Retirement MPF Scheme". |

(c) 以個人帳戶形式保留在原計劃 (如適用) Retained in the original scheme as personal account (where applicable)

14) 有關本人在第二部所述帳戶內的自願性供款<sup>5</sup> (如有)的安排。 Arrangement of my voluntary contributions<sup>Note 5</sup> (if any) in my account stated in Part II.

請選擇 (a) 或 (b)，並於適當方格內填上✓號。 Please select option (a) OR (b) and ✓ as appropriate.

(備註：如你沒有作出任何選擇，而帳戶內有由自願性供款產生的累算權益，則該等權益將以處理第三部第(13)項的權益的同樣方式處理。如你已在第三部第(14)項作出選擇，而帳戶內並沒有該等權益，則有關選擇將不會獲處理。)

(Remarks: If you do not select any options but there are accrued benefits derived from voluntary contributions, those benefits will be handled in the same way as those stated in Part III(13). If there are no such benefits in your account and you have made an election in Part III(14), the selected option will not be processed.)

(a) 與在第三部第(13)項所述由強制性供款所產生的累算權益一併轉移。 Transferred together with the accrued benefits derived from the mandatory contributions as in Part III (13).

(b) 按照原計劃的管限規則提取權益。 Withdrawn in accordance with the governing rules of the original scheme.

付款方式 (請在適當方格內填上✓號)： Method of payment (please ✓ as appropriate)：

支票付款 By Cheque

直接存入只以計劃成員名義開立的銀行帳戶 (不適用於以第三者名義開立的銀行帳戶)。(這項選擇只適用於有提供此項服務的受託人，並且銀行可能會因此而收取費用。詳情請向原受託人查詢。)

By depositing directly in a bank account under the name of scheme member only (a bank account under the name of a third party is not applicable). (This option is applicable only to trustees who provide such services and there may be bank charges involved. Please check with the original trustee for details.)

➢ 如原受託人乃交通銀行信託有限公司，其提供之直接存入服務只限存入交通銀行香港分行帳戶。

For Bank of Communications Trustee as the original trustee, direct depositing service is only restricted to bank account with **Bank of Communications Co., Ltd. Hong Kong Branch.**

銀行名稱 Name of bank： **交通銀行香港分行 Bank of Communications Co., Ltd. Hong Kong Branch**

銀行帳戶持有人姓名 Name of bank account holder： \_\_\_\_\_

銀行帳戶號碼 Bank account number： **027-** \_\_\_\_\_

➢ 此欄只適用於原受託人不是交通銀行信託有限公司。 This field is only applicable where original trustee is NOT Bank of Communications Trustee Limited.

銀行名稱 Name of bank： \_\_\_\_\_

銀行帳戶持有人姓名 Name of bank account holder： \_\_\_\_\_

銀行帳戶號碼 Bank account number： \_\_\_\_\_

**第四部：終止沒有剩餘款項的強積金帳戶 (如適用) Part IV: TERMINATION OF MPF ACCOUNT WITH NO RESIDUAL BALANCE (IF APPLICABLE)**

本人謹此指示原受託人在把本人於第二部所述的強積金成員帳戶內的所有累算權益轉移至新受託人後，以及在該帳戶內並無剩餘款項的情況下，終止該強積金成員帳戶。 I hereby give the original trustee an instruction to terminate my relevant MPF member account as referred to in Part II upon transfer of the full accrued benefits to the new trustee and there is no residual balance in the said account.

**第五部：授權及聲明 Part V: AUTHORIZATION AND DECLARATION**

本人同意積金局可為處理本人的累算權益轉移，向有關受託人、相關服務提供者，及其他相關機構披露本表格所收集的資料，或使該等人士或機構能夠接觸該等資料。本人聲明：本人已閱讀《計劃成員轉移權益須知》的內容；及盡本人所知所信，本表格所提供的資料正確及詳盡。 I hereby give consent to the MPFA to disclose information collected in this Form to the trustee(s) concerned, the relevant service provider(s) and other appropriate parties, or to enable such party or parties to access the information for the purposes of processing the transfer of my accrued benefits. I declare that: I have read the Notes to Transfer Benefits by Scheme Member; and to the best of my knowledge and belief, the information given in this Form is correct and complete.

S.V.

計劃成員簽署<sup>6</sup> Signature of the Scheme Member<sup>Note 6</sup>

受託人核印

日期 Date

如欲轉移至閣下之交通銀行愉盈退休強積金計劃帳戶，填妥表格後請寄回香港中環德輔道中121號遠東發展大廈1樓「交通銀行信託有限公司營運部」收，或交回任何一間交通銀行香港分行/支行。否則，請提交此表格(《填報須知》無須提交)予新受託人。 For transferring to your MPF account of BCOM Joyful Retirement MPF Scheme, please forward this completed form to "Operations Department, Bank of Communications Trustee Limited", 1/F, Far East Consortium Building, 121 Des Voeux Road Central, HK, or send through any branch / sub-branches of Bank of Communications Co., Ltd. Hong Kong Branch. Otherwise, please forward this form (excluding the 《Explanatory Notes》) to the new trustee after completion.

|                  |          |          |          |
|------------------|----------|----------|----------|
| 中介人專用<br>單位 / 機構 | 強積金中介人編號 | 強積金中介人姓名 | 強積金中介人簽署 |
|                  |          |          |          |

**計劃成員轉移權益須知**  
**Notes to Transfer Benefits By Scheme Member**  
(適用於自僱人士、個人帳戶持有人或終止受僱的僱員)  
(for self-employed person, personal account holder or employee ceasing employment)

(1) 用詞定義 Definition of terms :

- a. 「供款帳戶」- 指強積金計劃下主要用以接收僱主為僱員所作出以及代表僱員所作出的強積金供款（包括僱主及僱員部分）或自僱人士所作出的強積金供款的帳戶。  
"Contribution account" - an account in an MPF scheme which is mainly used to receive MPF contributions (both employer and employee portions) made by an employer for an employee and on behalf of the employee or by a self-employed person.
- b. 「個人帳戶」- 指強積金計劃下主要用以接收由另一帳戶轉入的累算權益的帳戶。  
"Personal account" - an account in an MPF scheme to receive the accrued benefits transferred from another account(s).
- c. 「原受託人」(在《強制性公積金計劃（一般）規例》(簡稱《規例》)中亦稱「轉移受託人」)- 指轉出你的累算權益的強積金計劃的受託人。  
"Original trustee" (also known as "transferor trustee" in the Mandatory Provident Fund Schemes (General) Regulation ("the Regulation")) - the trustee of an MPF scheme from which your accrued benefits are to be transferred.
- d. 「新受託人」(在《規例》中亦稱「承承受託人」)- 指轉入你的累算權益的強積金計劃的受託人。如你選擇將累算權益轉移至同一強積金計劃的另一個帳戶或轉移至同一受託人的另一個強積金計劃，在第 MPF(S)-P(M)號表格所述的新受託人將與原受託人相同。  
"New trustee" (also known as "transferee trustee" in the Regulation) - the trustee of an MPF scheme to which your accrued benefits are to be transferred. If you elect to transfer your accrued benefits to another account within the same MPF scheme or to another MPF scheme under the same trustee, the new trustee on Form MPF(S)-P(M) will be the same as the original trustee.
- e. 「原計劃」- 指轉出你的累算權益的強積金計劃。  
"Original scheme" - the MPF scheme from which your accrued benefits are to be transferred.
- f. 「新計劃」- 指轉入你的累算權益的強積金計劃。如你選擇將累算權益轉移至同一強積金計劃的另一個帳戶，在第 MPF(S)-P(M)號表格所述的新計劃將與原計劃相同。  
"New scheme" - the MPF scheme to which your accrued benefits are to be transferred. If you elect to transfer your accrued benefits to another account within the same MPF scheme, the new scheme on Form MPF(S)-P(M) will be the same as the original scheme.
- (2) 如你現時投資於強積金保證基金，則從該保證基金轉出累算權益可能導致你不符合部分或所有保證條件，從而影響你享有保證的資格。有關詳情請查閱原計劃的要約文件或向原受託人查詢。If you are currently investing in an MPF guaranteed fund, a transfer of the accrued benefits out of that guaranteed fund may result in some or all of the guarantee conditions not being satisfied; thus affecting your entitlement to the guarantee. Please check the offering document of the original scheme or consult your original trustee for details.
- (3) 請確保你在新計劃已開立個人帳戶或供款帳戶。否則，你在向新受託人提交第 MPF(S)-P(M)號表格之前，便須登記參加該新計劃。Please ensure that you have a personal account or a contribution account in the new scheme. Otherwise, you have to enrol in that scheme before you submit Form MPF(S)-P(M) to the new trustee.
- (4) 如欲從多於一個帳戶轉出累算權益，請就每個帳戶分別提交一份第 MPF(S)-P(M)號表格。If you wish to transfer-out the accrued benefits from more than one accounts, you should submit a separate Form MPF(S)-P(M) for each of those accounts.
- (5) 如欲在現職期間從你的供款帳戶轉出累算權益，請填寫第 MPF(S)-P(P)號表格。If you wish to transfer-out the accrued benefits from your contribution account during employment, you should complete Form MPF(S)-P(P).
- (6) 就每一個帳戶，除了由自願性供款所產生的累算權益或可根據原計劃管規規則選擇提取外，計劃成員應把帳戶內的所有累算權益整筆轉移。For each account, a scheme member should transfer the entirety of his accrued benefits therein in a lump sum except the part of the accrued benefits derived from voluntary contributions which the scheme member may elect to withdraw in accordance with the governing rules of the original scheme
- (7) 請小心填寫第 MPF(S)-P(M)號表格，因為受託人未必能夠撤銷已採取的行政步驟。Please complete Form MPF(S)-P(M) carefully as the administration procedures taken by the trustees may not be reversible.
- (8) 若你在第 MPF(S)-P(M)號表格上所提供的任何資料（包括簽署）不正確或不完整，受託人可能無法處理你的權益轉移要求。If any information provided on Form MPF(S)-P(M) (including the signature) is incorrect or incomplete, the trustees may not be able to process your benefit transfer request.
- (9) 新計劃的資料載於該計劃的要約文件，此等資料將有助你決定是否把累算權益轉移至該計劃。你可向新受託人索閱該要約文件。Information about the new scheme is set out in the offering document of that scheme. This information will assist you in making a decision about whether to make a transfer to that scheme. Copies of that offering document can be obtained from the new trustee upon request.
- (10) 如欲就轉移選擇作出查詢或尋求協助，請聯絡你的原受託人或新受託人。你亦可與強制性公積金計劃管理局（簡稱「積金局」）聯絡，查詢有關資金轉移的一般事項。積金局電郵地址：mpfa@mpfa.org.hk或熱線電話：2918 0102。If you wish to make enquiries or seek assistance in making your election to transfer, please contact your original trustee or new trustee. For general enquiries regarding fund transfer, you may contact the Mandatory Provident Fund Schemes Authority ("MPFA") via e-mail: mpfa@mpfa.org.hk or hotline: 2918 0102.

**填報須知**  
**Explanatory Notes**

註 Note (1) 如你沒有香港身份證，請填上你在護照上的姓名。If you do NOT possess a HKID Card, please fill in your name as shown on your passport.

註 Note (2) 請注意，如你沒有提供原受託人名稱、原計劃名稱、原計劃成員帳戶號碼、強積金帳戶類別、前任僱主名稱或僱主識別號碼，或所提供的資料有誤，則此項轉移要求或不獲處理。你可透過以下途徑獲取有關資料：

Please note that the transfer request may not be processed if the name of the original trustee, the name of the original scheme, your scheme member's account number in the original scheme, type of MPF account, the name of your former employer or the employer's identification number is not provided or is incorrect. This information can be found:

a. 成員證明書； in your membership certificate;

b. 周年權益報表；或 in your annual benefit statement; or

c. 受託人提供的成員查詢服務。through the member enquiry facilities available from trustees.

**如有疑問，請聯絡你的原受託人或僱主。If you are in doubt, please contact your original trustee or your employer.**

註 Note (3) 僱主識別號碼即受託人為有關僱主編配的號碼。受託人或會使用不同名稱來設定識別號碼（例如帳戶編號、僱主編號、合約編號、強積金客戶編號、參與計劃編號、計劃編號、附屬計劃編號）。你可在受託人發出的報表上或透過受託人為成員提供的諮詢服務獲取該號碼。如有疑問，請聯絡你的受託人或僱主。The employer's identification number is the number assigned by the trustee to the employer concerned. Trustees may use different names for this number (e.g. account number, company code, contract number, employer account number, employer code, employer ID, employer number, MPF client number, participating plan number, plan number, scheme number, scheme ID, sub-scheme number). The number can be found in the statements issued by the trustees or through the member enquiry facilities available from trustees. If you are in doubt, please contact your trustee or your employer.

註 Note (4) 請注意，如你沒有提供新受託人名稱、新計劃名稱或新計劃成員帳戶號碼，或所提供資料有誤，則此項轉移要求或不獲處理。你可透過以下途徑獲取有關資料：

Please note that the transfer request may not be processed if the name of the new trustee, the name of the new scheme or your scheme member's account number in the new scheme is not provided or is incorrect. The information can be found:

a. 成員證明書； in your membership certificate;

b. 周年權益報表；或 in your annual benefit statement; or

c. 受託人提供的成員查詢服務。through the member enquiry facilities available from trustees.

**不過，如你最近才參加計劃，並未獲悉新的成員帳戶號碼，則可留空此項。如有疑問，請聯絡你的新受託人。You may, however, leave the scheme member's account number blank if you have recently enrolled in the scheme and have not been notified of the new account number. If you are in doubt, please contact your new trustee.**

註 Note (5) 計劃成員可在原受託人向成員發出的周年權益報表上，獲知其現有強積金帳戶內是否有從自願性供款產生的累算權益。成員亦可利用受託人提供的查詢服務查核這項資料。如有疑問，請聯絡你的原受託人。A scheme member can check whether his existing MPF account contains any accrued benefits derived from voluntary contributions from his annual benefit statement issued by the original trustee to the member. The member can also check this information through the member enquiry facilities available from trustees. If you are in doubt, please contact your original trustee.

註 Note (6) 你的簽署必須與你之前提交予原受託人的簽名式樣相同。請注意，若本表格上的簽署與你的簽名式樣不符，有關轉移或不獲處理。如有疑問，請聯絡你的原受託人。The signature must be the same as your specimen signature previously submitted to your original trustee. Please note that the transfer may not be processed if the signature provided in this Form does not match your specimen signature. If you are in doubt, please contact your original trustee.

## Notes on Making Enquiry about Personal Account Information (Form PA-AP)

- (1) This “**Form PA-AP**” is to be completed by any person who wishes to make enquiry about his/her personal accounts information via an authorized person. The authorized person will also be required to complete part of the Form.
- (2) If you wish to make enquiry about personal account information for yourself, please use “**Form PA-SM**”. If you are a personal representative of a deceased scheme member, please use “**Form PA-PR**”.
- (3) You may submit your enquiry to the Authority by:
- a. **Visiting the Authority in person:** Please bring (1) the completed Form, (2) copy of ID document of the scheme member (e.g. HKID Card) and (3) original HKID Card of the authorized person.

| Office                  | Address  | Office Hours  |  |
|-------------------------|--|---|--|
| <b>Head Office</b>      | Units 1501A and 1508, Level 15,<br>International Commerce Centre,<br>1 Austin Road West, Kowloon | Weekdays:<br>8:45 am to 5:45 pm                       | Closed on<br>Saturdays,<br>Sundays and<br>Public<br>Holidays |
| <b>Central Office</b>   | 23/F, Nexus Building,<br>41 Connaught Road Central, Central, Hong Kong                           |   |  |
| <b>Kwai Fong Office</b> | Level 36, Tower 1, Metroplaza,<br>223 Hing Fong Road, Kwai Fong, New Territories                 |   |  |
| <b>Kwun Tong Office</b> | 25/F, Tower 1, Millennium City 1,<br>388 Kwun Tong Road, Kwun Tong, Kowloon                      | Weekdays:<br>9:00 am to 1:00 pm<br>2:00 pm to 5:00 pm |  |
| <b>Enquiry Counter</b>  | Room G01, Labour Tribunal, 36 Gascoigne Road,<br>Yaumatei, Kowloon                               |   |  |

- b. **Mail/Fax:** Please post or fax the completed Form and copies of ID supporting documents of both the scheme member and the authorized person to the Authority. Search result will be sent to the authorized person by mail.

Address: Member Services Section, 25/F, Tower 1, Millennium City 1, 388 Kwun Tong Road, Kwun Tong, Kowloon  
 Fax: 3146 7367

- (4) To ensure proper authorization has been given by the scheme member and to protect members’ personal data, the Authority may contact and confirm with the scheme member as and when necessary before processing a request. Request will not be processed if confirmation from the scheme member concerned cannot be obtained.
- (5) Notes on using this Form PA-AP:
- a. Only one authorized person is allowed for each form. Multiple authorized persons in one form will not be accepted.
  - b. For any alteration of information on the Form, full signature of the scheme member must be present.
  - c. For submission in person, Form PA-AP must be submitted by the authorized person himself/herself. Submission by any other third party will not be accepted.
  - d. For submission in person, original ID document of the authorized person must be presented for inspection.
  - e. ID document of the scheme member must be submitted in printed form.
  - f. Corresponding and valid ID documents of both the scheme member and the authorized person must be presented. For example, if HKID No. is listed in the Form, a copy of HKID Card must be presented. Non-corresponding and expired ID documents will not be accepted.
  - g. This form is **valid for one month** from the date on which the scheme members signs the form. Expired forms will not be accepted.
- (6) Please note that the Authority does not have detailed information of individual personal accounts, such as account number, funds invested and account balance. To check such details of the personal account(s), the account holder may approach his/her scheme trustee(s) directly for assistance.
- (7) Please note that only personal account information is available. For information on contribution accounts, please check with the relevant employer(s) for details.
- (8) The Form and copies of ID document submitted will not be returned.
- (9) The Authority reserves the right to change the above requirements without prior notice.

## 查詢個人帳戶資料須知（表格PA-AP）

- (1) 本「表格 PA-AP」供擬授權他人，代辦查詢其個人帳戶的人士填寫。獲授權人亦須填寫本表格的部份內容。
- (2) 如閣下擬自行查詢你的個人帳戶資料，請填寫「表格 PA-SM」。如閣下為已故計劃成員的遺產代理人，請填寫「表格 PA-PR」。
- (3) 閣下可選擇以下列方法向本局提交查詢：
  - a. **親臨本局**：請閣下攜同（1）已填妥的表格、（2）計劃成員的身分證明文件副本（如身分證）及（3）獲授權人士的身分證正本親臨本局辦事處查詢。

| 辦事處   | 地址                                | 辦公時間                             |                      |
|-------|-----------------------------------|----------------------------------|----------------------|
| 總辦事處  | 九龍柯士甸道西1號環球貿易廣場15樓<br>1501A及1508室 | 星期一至五：<br>上午8時45分至<br>下午5時45分    | 星期六、<br>日及公眾<br>假期休息 |
| 中環辦事處 | 香港中環干諾道中41號盈置大廈23樓                |                                  |                      |
| 葵芳辦事處 | 新界葵芳興芳路223號新都會廣場1座36樓             |                                  |                      |
| 觀塘辦事處 | 九龍觀塘觀塘道388號創紀之城1期1座25樓            | 星期一至五：<br>上午9時至下午1時<br>下午2時至下午5時 |                      |
| 諮詢處   | 九龍油麻地加士居道36號勞資審裁處G01室             |                                  |                      |

- b. **郵遞/傳真**：請閣下將已填妥的表格連同計劃成員及獲授權人士的身分證明文件副本郵遞或傳真至本局。本局將以信函回覆閣下。

地址：九龍觀塘觀塘道388號創紀之城1期1座25樓 成員服務組  
傳真：31467367

- (4) 為確保查詢已獲得適當授權及保障計劃成員的個人資料，本局在處理查詢時或會與計劃成員聯絡，以核實表格上的資料。如未能核實資料，本局有權不處理有關查詢。
- (5) 使用本表格須知：
  - a. 每一張表格上只可填寫一名獲授權人。如表格上有多於一名獲授權人，查詢將不獲處理。
  - b. 表格上的資料如被刪改，計劃成員必須在旁簽署作實，否則查詢將不獲處理。
  - c. 如親臨遞交查詢，「表格PA-AP」必須由表格上的獲授權人本人遞交。由非獲授權人士遞交的查詢將不獲處理。
  - d. 如親臨遞交查詢，獲授權人必須出示其身分證明文件正本。
  - e. 計劃成員的身分證明文件副本必須以書面形式提交。
  - f. 計劃成員及獲授權人必須提交相符及有效的身分證證明文件予本局核對（例：如表格上填上香港身分證號碼，提交的證明文件須為香港身分證）。不相符或逾期的身分證證明文件將不獲接納。
  - g. 本表格的有效期為一個月（由計劃成員簽署表格當日起計算），逾期遞交的查詢將不獲處理。
- (6) 請注意，本局紀錄並無個人帳戶的詳細資料，如帳戶號碼、所選擇之基金組合或戶口結餘等。帳戶持有人可直接向有關強積金受託人查詢。
- (7) 請注意，本局只能提供有關成員的個人帳戶資料。如欲查詢其他的強積金供款帳戶資料，請向有關僱主查詢。
- (8) 已遞交之表格及身分證證明文件副本將不予退還。
- (9) 本局保留權利更改以上條文而不作另行通知。

**Mandatory Provident Fund Schemes Authority**  
**Personal Information Collection Statement**  
(Form PA-SM, Form PA-AP and Form PA-PR)

The personal data to be supplied in this Form are for the purposes of processing your request for personal account details. The personal data will be used, disclosed or transferred only for purposes related to the request or where permitted by law. Failure to supply the requisite personal data may result in the Authority being unable to process the request if it affects the Authority's ability to retrieve the requested information or contact the scheme member / authorized person / personal representative.

If you wish to request access to and/or correction of your personal data held by the Authority, you may do so in writing addressed to the Personal Data Privacy Officer, Mandatory Provident Fund Schemes Authority, Level 16, International Commerce Centre, 1 Austin Road West, Kowloon, Hong Kong.

**強制性公積金計劃管理局**  
**個人資料收集聲明**  
(表格 PA-SM、表格 PA-AP 及表格 PA-PR)

藉本表格提供的個人資料，乃為處理閣下查閱個人帳戶資料的申請之用。有關資料只會因應與該項申請有關的用途或在法律允許的情況下加以使用、披露或轉移。如未能提供所需個人資料，以致本局難以抽取所要求查閱的資料或聯絡計劃成員／獲授權人／遺產代理人，則本局可能無法處理閣下的申請。

如欲查閱及／或更正閣下存於本局的個人資料，可致函香港九龍柯士甸道西一號環球貿易廣場 16 樓強制性公積金計劃管理局個人資料私隱主任，提出有關要求。



**Request For Personal Account Information**  
**Authorization Form**  
**查閱個人帳戶資料**  
**授權書**

|  |   |                 |
|--|---|-----------------|
| <b>Particulars of the Scheme Member 計劃成員資料</b>         |   |                 |
| Name In English<br>英文姓名                                |   |                 |
| Name In Chinese<br>中文姓名                                |   |                 |
| HKID / Passport No.*<br>香港身分證/護照號碼*                    | * Please provide copy of HKID / Passport<br>請附上香港身分證/護照副本   |                 |
| Day-time Telephone No.<br>日間聯絡電話                       |   |                 |
| <b>Authorization &amp; Declaration</b><br><b>授權及聲明</b> | <p>I hereby authorize the person listed below to enquire and receive details of my personal account(s) including my name, HKID/Passport number, and name, business address and telephone number of the related MPF trustee(s).</p> <p>I declare that to the best of my knowledge and belief, the information given in this Form and the submitted documents is correct and complete.</p> <p>本人現授權下列人士，查閱及獲取本人於強積金計劃下有關個人帳戶資料，包括本人姓名、香港身分證/護照號碼、有關強積金受託人的名稱，營業地址及電話。</p> <p>本人聲明，本人並深知確信本表格及隨附文件所提供的資料均屬正確無訛且並無缺漏。</p> |                 |
|  | <table border="1"> <tr> <td>Signature<br/>簽署</td> <td>Date (DD/MM/YY)<br/>日期 (日/月/年)</td> </tr> </table>  | Signature<br>簽署 |
| Signature<br>簽署  | Date (DD/MM/YY)<br>日期 (日/月/年)   |                 |

|  |   |                 |
|--|---|-----------------|
| <b>Particulars of the Authorized Person 獲授權人資料</b> |   |                 |
| Name In English<br>英文姓名                            |   |                 |
| Name In Chinese<br>中文姓名                            |   |                 |
| HKID / Passport No.*<br>香港身分證/護照號碼*                | * Please provide copy of HKID / Passport for mail/fax enquiry<br>如郵遞/傳真遞交，請附上香港身分證/護照副本   |                 |
| Day-time Telephone No.<br>日間聯絡電話                   |   |                 |
| Mail results to this address<br>請將結果寄往此地址          |   |                 |
| <b>Declaration</b><br><b>聲明</b>                    | <p>I declare that I have duly obtained authorization from the scheme member listed above to check his/her personal account information, and to the best of my knowledge and belief, the information given in this Form and the submitted documents is correct and complete.</p> <p>本人聲明，本人已獲上述成員正式授權，代其查詢個人帳戶資料；本人並深知確信本表格及隨附文件所提供的資料均屬正確無訛且並無缺漏。</p> |                 |
|  | <table border="1"> <tr> <td>Signature<br/>簽署</td> <td>Date (DD/MM/YY)<br/>日期 (日/月/年)</td> </tr> </table>  | Signature<br>簽署 |
| Signature<br>簽署                                    | Date (DD/MM/YY)<br>日期 (日/月/年)   |                 |

Note: It is an offence under Section 43E of the Mandatory Provident Fund Schemes Ordinance if a person makes a false or misleading statement in a material respect to the Authority and the approved trustees. Convicted offenders are liable to a fine of HK\$100,000 and imprisonment for 12 months.  
附註：強制性公積金計劃條例第 43E 條訂明，任何人士如在要項上向積金局或核准受託人作出虛假或具誤導性的陳述，即屬犯罪。一經定罪，可被罰款 10 萬港元及監禁 12 個月。

|                    |  |     |     |      |
|--------------------|--|-----|-----|------|
| Official Use Only: | Ck:  | Rv: | Ap: | 1211 |
|                    | <input type="checkbox"/> ICC <input type="checkbox"/> NB <input type="checkbox"/> MP1 <input type="checkbox"/> MC1 <input type="checkbox"/> LT | Dt: | Tm: |      |

To 致: Sun Flower Insurance Brokers Limited (“SFIB”) 新華保險顧問有限公司(「新華顧問」)

## MPF Client Declaration Form 強積金客戶聲明書

Note 注意:

1. This declaration form is applicable for conducting regulated activities under the Guidelines on Conduct Requirements for Registered Intermediaries issued by the MPFA (“MPFA Guidelines”). 本聲明書適用於從事積金局《註冊中介人操守要求指引》(「積金局指引」)所規定之受規管活動。
2. Customer to complete in BLOCK LETTERS and tick ✓ the appropriate boxes. 請客戶用正楷填寫，並於適當的方格內加上「✓」號。
3. Where regulated activities are conducted, this Declaration Form must also be completed and returned to SFIB. 如進行受規管活動，則必須填寫本聲明書並交回給新華顧問。

| A. Client information 客戶資料  |  |   |
|---|--|---|
| 1. Name of customer (surname first, where applicable) 客戶姓名(姓氏在前(如適用)) | 2. Chinese name 中文姓名                                   | 3. Salutation 稱謂<br><input type="checkbox"/> Mr 先生 <input type="checkbox"/> Mrs 太太<br><input type="checkbox"/> Miss 小姐 <input type="checkbox"/> Ms 女士<br><input type="checkbox"/> Employer 僱主 |
| 4. HKID no. /Passport no. 身份證號碼/護照號碼 (If applicable 如適用)              | 5. Employer ID/Scheme ID 僱主編號/計劃編號 (If applicable 如適用) | 6. Level of Education 教育程度<br><input type="checkbox"/> Primary or below 小學或以下學歷<br><input type="checkbox"/> Above primary 小學以上學歷  |

## B. Clients with special needs 需要特別照顧的客戶

B.1

According to MPFA Guidelines, a client with special need (who is person who is not, or may not be, able to fully understand the type of information to be provided/discussed or make a key decision) may include a client who is illiterate, with low level (primary level or below) of education, visually or otherwise impaired in a manner that affects his/her ability to make the relevant key decision independently.

根據積金局指引，需要特別照顧的客戶（即不能完全明白或也許不能完全明白所提供及討論的及不能作出重要決定的人士）可包括，有語文困難、低學歷（小學程度或以下）、有視力或其他肢體受損的客戶，而該等情況影響其獨立地作出強積金相關的重要決定的能力。

- Not applicable. I am not a client with special needs.  
不適用。本人並不是需要特別照顧的客戶。
- As a customer with special needs, I prefer the following option to witness the relevant sales process and constituent fund selection process (referred as the “Sales Process”):  
作為需要特別照顧的客戶，本人於下列兩項中選擇其一以見證是次銷售及選擇成分基金過程（下稱「銷售過程」）：

- to be accompanied by a companion to witness the Sales Process.  
本人攜同同伴見證銷售過程。

\_\_\_\_\_  
Full name of witness  
見證人姓名

\_\_\_\_\_  
HKID/Passport no. of witness  
見證人身份證/護照號碼

\_\_\_\_\_  
Signature of witness  
見證人簽署

\_\_\_\_\_  
Date  
日期

- to have an additional member of staff to witness the Sales Process.  
本人要求提供多一名員工見證銷售過程。

\_\_\_\_\_  
Full name of staff  
員工姓名

\_\_\_\_\_  
Staff number  
員工號碼

\_\_\_\_\_  
Signature of staff  
員工簽署

\_\_\_\_\_  
Date  
日期

- I do not want any one else to accompany me or witness the sale process and, therefore, do not choose either of the above option.  
本人不要任何其他人士陪同或見證銷售過程，故不選擇上述任何一項。

B.2

A registered intermediary should provide extra care of, and support for, clients (including representatives of employers) with special needs during the sales and marketing process relating to the making of a key decision. A key decision for this purpose refers to one of the following decisions:

- (a) choosing a particular constituent fund;
- (b) making a transfer that would involve a transfer out of a guaranteed fund;
- (c) making an early withdrawal of accrued benefits from the MPF System; or
- (d) making how much voluntary contributions into a particular registered scheme or a particular constituent fund.

註冊中介人如遇到需要特別照顧的客戶(包括僱主代表)，在進行與作出重要決定有關的銷售或推銷程序時，需給予額外的照顧及支援。重要決定是指以下任何一項決定：

- (a) 選擇某一特定的成分基金；
- (b) 因轉移而涉及從現有強積金賬戶轉出保證基金；
- (c) 從強積金制度提早提出累算權益；或
- (d) 向某一特定的註冊計劃或某一特定的成分基金作出多少自願性供款。

- Not applicable, activities do not involve any key decision as described above.  
不適用，活動不涉及上述的重要決定。

**C. Transferring out of guaranteed funds 從現有強積金賬戶轉出保證基金**

- I have been warned against and I understand the risk that transfer-out from the guaranteed fund may result in the loss of the guarantee (either a loss which I may incur or, where I am a representative of an employer, the loss which employees of the employer may incur as the result of the transfer). I have also been advised to either check the offering document or consult the relevant trustee for details for the terms of the guarantee and take into account the said risk before transferring out of that fund.  
本人已獲警告且本人理解從現有強積金賬戶轉出保證基金涉及風險，可能會導致損失保證（有關轉出可導致是本人自己遭受損失，或如本人是僱主代表，則是該僱主旗下僱員遭受損失）。本人亦已獲得建議，於從該基金中轉出保證基金之前，要查閱發售文件或諮詢有關受託人以瞭解保證條款之詳情並且考慮到上述風險。

**D. Suitability Assessment 適合性評估**

According to The MPFA Guidelines, suitability assessment is required if the sales and marketing process involves one or more of the following circumstances:

- (a) extending an invitation or inducement to a specific client that involves the choice of a particular constituent fund;  
(b) giving regulated advice to a specific client that involves the choice of a particular constituent fund;  
(c) giving detailed advice to the client in relation to a decision on early withdrawal of accrued benefits from the MPF System; or  
(d) giving detailed advice to the client in relation to a decision as to the amount of any voluntary contributions to be paid into the MPF System.

根據積金局指引，如銷售或推銷程序涉及下列各項之其中一項或多於一項，需進行適合性評估：

- (a) 發出邀請或誘使特定客戶作出關乎某一特定成分基金的選擇；  
(b) 向指定客戶提供作出關乎某一特定成分基金的選擇的受規管建議；  
(c) 向客戶提供有關從強積金制度提早提取累算權益的決定之詳盡建議；或  
(d) 向客戶提供有關向強積金制度注入多少自願性供款的決定之詳盡建議。

- Not Applicable. None of the above circumstances is involved or the customer does not agree to provide the information required for suitability assessment.

不適用，不涉及任何上述情況或客戶不同意提供進行適合性評估所需的資料。

**(Proceed to Section E and sign where appropriate. 下往E部並於適當位置簽署。)**

- I understand the result of Suitability Assessment Questionnaire is for my reference only. The information provided should not be relied upon when making any investment choices for MPF account(s). The final decision of any investment choices is mine.

本人明白適合性風險評估問卷之結果只供本人參考用途。本人不應該依靠該等資訊作出強積金賬戶之投資選擇。而所有投資選擇的最終決定均由本人作出。

**(Attach a completed Suitability Assessment Questionnaire. 連同已完成的風險適合性評估問卷一併遞交。)**

**E. Personal Information Collection Statement 收集個人資料聲明**

I/We hereby authorize Sun Flower Insurance Brokers Limited (SFIB) to collect, store, analyze, administer and utilize all the data and information in regard and related to my/our insurance policies/MPF schemes.

本人/本公司現特授權“新華保險顧問有限公司”(新華保險)收集、儲存、分析、管理和使用所有關於本人/本公司保險/強積金計劃及相關的資料和信息。

SFIB must handle my/our data and information with strict confidence guided under HKSAR's legislation in respect of privacy. SFIB can only use my/our data and information for their internal purpose and such usage must be restricted to their related departments and/or divisions.

“新華保險”必須以極為謹慎的態度和方法去儲存和處理本人/本公司的資料和信息，並要遵守香港特別行政區一切有關私隱的法例和指引。“新華保險”只能把有關本人/本公司的資料和信息作內部用途，並只能供其相關的部門使用。

SFIB must set up specific guidelines and security measures, including but not limited to firewall-type software, in order to safeguard my/our privacy and to prevent any possible leakage of my/our data and information to any other “unrelated third parties” including individuals and/or companies.

“新華保險”必須設立和制定相關的指引和安全措施(包括但不限於像電腦防火牆之類的軟件)，以確保本人/本公司的私隱、資料和信息不會外泄給任何“不相關的第三者”(包括個人或/及公司)。

Whenever necessary, SFIB must help me/us to access to my/our own data and information collected and stored in SFIB. We reserve the right to ask SFIB to amend, correct or delete my/our data and information from their data bank whenever we want and for whatever reasons.

無論任何時間，“新華保險”均須協助本人/本公司查閱由“新華保險”收集和儲存有關本人/本公司的資料和信息。本人/本公司有權要求“新華保險”條改、更正或刪除該等資料和信息而毋須作出任何解釋。

This authorization will be effective immediately upon my/our signature and will continue until we will terminate it by written notification.

此授權書由正式簽署之日起開始生效，並會繼續維持有效，直至本人/本公司以書面正式通知取消為止。

**F. Signature 簽署**

By signing this form, I confirm that the information, answers and/or declaration given in this form and its attachment are correct and complete and I understand and agree to the terms of the Personal Information Collection Statement set out under F above.

簽署本確認書即表明本人確認本確認書及其附件所提供之資料，回答及/或聲明正確且完整，本人理解並同意載於上文F部之收集個人資料聲明的條款。

I have received the Information Leaflet and accept the contents there when giving the above mentioned instruction(s) or submitting the relevant application(s).

本人已接獲資料單張並於作出上述指示或提交相關申請表時已接受其中所載之內容。

I have received a copy of the latest version of the offering document, and was advised to read carefully and understand the information contained therein prior to making the transfer and any other key MPF decision.

本人已收到發售文件之最新版本，且獲得建議，於作出轉移及任何其他重要強積金決定之前應仔細閱讀並理解其中所載之資料。

I have been advised that I will, as soon as practical, receive a copy of all signed application forms and that, generally speaking, the forms will be passed on to the relevant trustee for processing within 3 working days].

本人亦得知本人會，在可行的情況下，盡快收到]所有已簽署的申請表之副本，已被通知有關申請表一般來說將於三個工作天內提交給有關受託人處理。

**The registered intermediary has explained the details on the Information Sheet and the Guideline on Transfer under ECA (a copy of which has also been provided to me) and I fully understand the explanation.**

註冊中介人已向本人解釋資料單張及僱員自選安排下之轉移指引（已向本人提供其副本）之詳情，且本人完全理解其解釋。

X  
Signature of customer  
客戶簽署

\_\_\_\_\_  
Date  
日期

X  
Signature of sales staff  
銷售員工簽署

\_\_\_\_\_  
Date  
日期