

MASS Mandatory Provident Fund Scheme**Application Form
(For Personal Account)****萬全強制性公積金計劃****申請書****(個人帳戶)**

MASS Mandatory Provident Fund Scheme – Personal Account Application
萬全強制性公積金計劃 – 個人帳戶申請

1. Enrolment Particulars

參與計劃資料

Name of Applicant
申請人姓名

*Mr./Ms./Mrs.

(English)

*先生/小姐/女士

(中文)

HKID Card No./Passport No.[#]
香港身分證/護照號碼[#]

Date of Birth**
出生日期**
(MM月/DD日/YY年)

Nationality
國籍

Residential Address
住址

Tel No.
電話

Fax No.
傳真

Education level
教育程度

Email Address
電郵地址

Occupation
職業

2. Scheme Effective Date

計劃生效日期

____/____/____ (This field must be completed)
MM月 DD日 YY年 (此欄必須填寫)

3. Scheme Nature : Transferred Scheme (Please attach a copy of completed Fund Transfer Form)

計劃性質 轉轉計劃 (請連同填妥之基金轉移表格一併交回)

4. Investment Fund Allocation Percentage 投資基金分配百分比

(If this section is left blank, then your contributions will be invested in all constituent funds in equal shares (to the extent practically possible) in accordance with the terms of the Principal Brochure of the MASS Mandatory Provident Fund Scheme. 如果此部份留空, 根據萬全強制性公積金計劃的主要推銷刊物, 供款將平均分配(在實施可行的情況下)及投資於各項成分基金。)

	Mandatory Cont. 強制性供款	Voluntary Cont. 自願性供款
Global Stable Fund 環球均衡基金		
Global Growth Fund 環球增值基金		
Guaranteed Fund 保證基金		
MPF Conservative Fund 強積金保守基金		
Global Equity Fund 環球證券基金		
Global Bond Fund 環球債券基金		
Asian Balanced Fund 亞洲均衡基金		
Japan Equity Fund 日本股票基金		
Asian Pacific Equity Fund 亞太股票基金		
US Equity Fund 美國股票基金		
European Equity Fund 歐洲股票基金		
Hong Kong Equities Fund 香港股票基金		
Greater China Equity Fund 大中華股票基金		
Total 總數	100%	100%

*Please delete whichever inapplicable 請刪去不適用項

Please provide a photocopy 請附上影印本

**If your HKID card states only your year of birth and you have no other proof of identity stating the exact date of birth (e.g., birth certificate, passport), please enter December 31 as the month and the day. If your HKID card contains the year and month but not the day, you should enter the last day of the month as the day of birth. 如您的香港身分證上只有出生年份, 而您沒有其他證件證明您實際的出生日期 (例如出生證明書或護照), 請以12月31日作為出生日期。如您的香港身分證上只有出生年份和月份而沒有出生日子, 請以有關月份的最後一天作為出生日期。

Declaration 聲明:

Personal Information Collection Statement

The information provided by Participating Employers or Members of the Schemes on the application forms or other forms prescribed by MassMutual Trustees Limited ("Trustee") and details of transactions or dealings by such Participating Employers or Members may be held by the Trustee for the purposes of processing their participation in the Scheme and providing administrative, computer or any other services as may be considered necessary in connection with the MPF operation, and may also be used for observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure or notification requirements to which any recipient of the data is subject) and for providing information for the dispatch of information on MPF products or services from the Trustee. Participating Employers and Members have a right to require access to and correction of their company or personal data or to request that their company or personal data not be used for direct marketing purposes by giving written notice to the Trustee. They will at all time be governed by the provisions of the Personal Data (Privacy) Ordinance and Mandatory Provident Fund Schemes Ordinance.

收集個人資料聲明

參與僱主或計劃成員在申請表或在美國萬通信託有限公司(下稱「受託人」)所指定表格提供的資料及該等人士的交易詳情可由受託人保留，以作為申請參加本計劃之用，並可用作提供行政、電腦或其他因強積金運作而需要的服務，並可用作遵行任何有關適用司法管轄區的法律、政府或監管規定（包括任何人所收取到的資料披露及通知規定）；及提供受託人用作推廣或發放其強積金產品或服務資料。參與僱主和計劃成員有權查閱及更正其公司或個人資料，或致函受託人要求其公司或個人資料不得使用於直接促銷用途。該等資料之運用將會受制於個人資料（私隱）條例及強制性公積金計劃條例。

Upon receipt of this application form, the Trustee will report the relevant information to the MPFA accordingly. The applicant then has the obligation to make contributions as required by the Mandatory Provident Fund Scheme Ordinance (Cap. 485).

受託人接獲本申請書後，便會向積金局報告有關資料，故申請人須依強制性公積金計劃條例（第485章）履行供款責任。

I have read and understood the Principal Brochure.

本人已閱讀並明白主要推銷刊物的內容。

Name of Applicant

申請人姓名 :

Authorized Signature (& Company Chop, if any)

授權人簽署(及公司蓋章，如有) :

(Your signature should be the same as that given in the attached Participation Agreement and will be used to verify your future correspondence with us. 此簽署式樣必須與隨附之參與協議書上的簽署相同並將用於核對您日後提交給本公司的文件)

Date (MM/DD/YY)

日期(月/日/年) :

Name of Registered Subsidiary Intermediary

註冊強制性公積金中介人姓名 :

Consultant Code

顧問編號

OFFICIAL USE ONLY 本公司專用			
Date Received 接件日期	Received by 接件人員	Input by 資料輸入員	Verified by 核對員

This application form should only be issued in conjunction with the Principal Brochure.

本申請書必須連同主要推銷刊物一併發出。

Remarks 備註：

- To avoid any delay in scheme application processing, please check the completeness of the following information and submit it to us:-

為避免延誤有關計劃申請程序，請核對以下資料並交回本部：-

1. The **original** copy of this Application Form. Please note that a faxed copy will not be accepted.
此計劃申請書的正本。敬請注意：本部不接受計劃申請書的傳真本。
 2. Completed and Signed Participation Agreement;
已填妥及簽妥的參與協議書；
 3. HKID / Passport Copy; (Please stamp “COPY” on to the image of the photo in the copy)
香港身分證 / 護照副本；（請於副本上的人像上面印上「COPY」）
 4. Proof of Residential Address; (e.g. utility bill or bank statement within recent 3 months)
住址證明 (例如：最近三個月之公用事務賬單或銀行月結單)
 5. Completed Scheme Member's Request for Fund Transfer Form (MPF(S)-P(M)) or Employee Choice Arrangement (“ECA”) – Transfer Election Form (MPF(S)-P(P)).
填妥之計劃成員資金轉移申請表 (MPF(S)-P(M))或「僱員自選安排」— 轉移選擇表格(MPF(S)-P(P))。
 6. Please initial next to any corrections you make on this form.
如有任何刪改，請於刪改處旁簽署。
-

PARTICIPATION AGREEMENT FOR PERSONAL ACCOUNT MEMBER

個人帳戶成員參與協議

THIS PARTICIPATION AGREEMENT is made on _____(Date)

本協議於_____(日期)由下列雙方簽訂

BETWEEN 有關雙方:

- (1) **MASSMUTUAL TRUSTEES LIMITED**, whose registered office is at 4th Floor, MassMutual Tower, 38 Gloucester Road, Wanchai, Hong Kong (the “Trustee”); and 美國萬通信託有限公司，其註冊辦事處位於香港灣仔告士打道38號美國萬通大廈4字樓(下稱「受託人」)；及
- (2) _____(the “PM” 下稱「參與成員」).
(Full Name of Personal Account Member 個人帳戶成員全名)

RECITALS 敍文:

- (A) The Trustee is the Trustee of the Mass Mandatory Provident Fund Scheme (the “Master Trust Scheme”), which was established by a deed (“the Deed”) dated 27 January 2000 made by the Trustee as amended from time to time.
萬全強制性公積金計劃(下稱「集成信託計劃」)依據於2000年1月27日由其受託人以不時修改的有關契約(下稱「有關契約」)成立，受託人爲集成信託計劃的受託人。
- (B) The PM wishes to join the Master Trust Scheme in order to establish a retirement benefits scheme (the “Participating Scheme”) for his or her own benefit as a personal account member.
參與成員希望以個人帳戶成員參與集成信託計劃，用以成立爲保障其利益之退休保障計劃(下稱「參與計劃」)。
- (C) The Participating Scheme shall be governed by the Deed and this Participation Agreement.
參與計劃將受有關契約及本參與協議規限。

PROVISIONS 條文:

1. Unless otherwise stated, words and expressions used in this Participation Agreement (including the Recitals) shall have the meanings given to them in the Deed.
除非另有規定，本參與協議中使用的文字和表述(包括敍文)應具有有關契約所給予的涵義。
2. The PM hereby establishes a Participating Scheme to be called the _____ Scheme with effect from _____(Date),
(Name of Personal Account Member)
to be governed by the terms of the Deed and this Participation Agreement.

參與成員現成立一個參與計劃名爲 _____ 計劃生效日
(個人帳戶成員名稱)
爲 _____(日期)，並受有關契約及本參與協議的條款規限。

3. The PM hereby covenants with the Trustee to comply with and be bound by the provisions of the Deed and this Participation Agreement and all applicable laws and regulations.
參與成員現向受託人契諾遵守有關契約及本參與協議及所有適用法律和法規的規定並受其約束。
4. The PM warrants that the information from time to time to be provided by the PM in relation to Investment Mandates, Switching Instruction Forms and otherwise will be correct in all respects.
參與成員保證，由參與成員就不時提供的投資授權、轉換指令表格及其他資料在所有方面均是正確的。
5. Subject to the provisions of the Deed and this Participation Agreement, the PM undertakes and agrees to hold the Trustee indemnified against any and all proceeding, costs, charges, liabilities and expenses occasioned by any and all actions, claims, demands or proceedings in connection with the Master Trust Scheme or the Participating Scheme either:
在有關契約及本參與協議條款的規限下，參與成員承諾且同意，對於任何和所有訴訟、訟費、收費、債項和開支，只要上述各項是因發生下列事件而引起與集成信託計劃或本參與協議有關的任何和所有法律行動、索償、要求或法律訴訟所導致的，一概會向受託人作出賠償：
 - (a) arising out of the breach by the PM of the warranty referred to in paragraph 4; or
因參與成員違反第4條所述的保證而引起的；或
 - (b) as a result of any failure or omission on the part of the PM to duly and punctually perform or observe any obligations pursuant to the Deed and this Participation Agreement or otherwise so far as they relate to the PM.
因參與成員未能妥善及準時地履行或遵守依照有關契約及本參與協議之任何責任或與參與成員相關之責任所造成的失誤或遺漏。
6. The PM undertakes and agrees to pay all fees and expenses which are payable by it under the terms of the Deed and this Participation Agreement.
參與成員承諾且同意支付其在有關契約及本參與協議條款下應該支付的所有費用和開支。
7. The PM hereby acknowledges that :
參與成員確認：
 - (a) He/she is aware that MassMutual Asia Limited (“MMA”) is the promoter of the Master Trust Scheme and its registered office is at 12th Floor, MassMutual Tower, 38 Gloucester Road, Wanchai, Hong Kong. MMA, the immediate holding company of the Trustee, is a registered principal intermediary with the Mandatory Provident Fund Schemes Authority (MPF Registration No.: IC000218) and is carrying on life insurance business.
他/她已得悉美國萬通保險亞洲有限公司(下稱「美國萬通亞洲」)是集成信託計劃的推銷商，其註冊辦事處位於香港灣仔告士打道38號美國萬通大廈12字樓。作為受託人的直屬控股公司，美國萬通亞洲是強制性公積金計劃管理局的註冊主事中介人(強積金中介人註冊號碼: IC000218)，主要經營人壽保險業務。
 - (b) The registered subsidiary intermediary (“Intermediary”) mentioned in the “MASS Mandatory Provident Fund Scheme Personal Account Application Form” (“Application Form”), completed for the PM for the purpose of joining the Master Trust Scheme, is

appointed by MMA to distribute the Master Trust Scheme, and to invite and induce another person to make a material decision related to the matters set out in section 34F(5) of the Mandatory Provident Fund Schemes (Amendment) Ordinance 2012.

為參與集成信託計劃，替參與成員填妥的「萬全強制性公積金計劃個人帳戶申請書」(下稱「申請書」)當中提及的註冊強制性公積金附屬中介人(下稱「中介人」)是由美國萬通亞洲委任，負責分發集成信託計劃及邀請和誘使其他人士作出與2012年強制性公積金(修訂)條例第34F(5)條中所述的事項有關的重要決定。

(c) The Intermediary has provided his/ her business card to the PM.

中介人已向參與成員提供他/她的名片。

(d) In respect of the invitation and inducement mentioned in clause 7(b) hereinabove, the Intermediary will be compensated by way of commission which will not be different depending on the choices of the constituent funds made by the PM.

就上述第7(b)條提及的邀請和誘使，中介人將會獲得佣金作為報酬，而該報酬不會因應參與成員對成分基金的選擇而有差異。

8. This Participation Agreement shall be terminated in accordance with Rule 19 of the Deed.
按照有關契約第19條，本參與協議可被終止。

9. The Application Form shall form part of this Participation Agreement.
申請書將構成本參與協議的一部份。

10. Subject to the approval of the Mandatory Provident Fund Scheme Authority, the Trustee can amend this Participating Agreement from time to time by way of notice to the PM before any proposed amendments shall take effect.
在強制性公積金計劃管理局給予批准的規限下，受託人可對本參與協議不時作出修改，但須在任何建議中的修訂向參與成員發出通知。

11. This Participation Agreement shall be governed by the laws of Hong Kong.
本參與協議應受香港法律約束。

IN WITNESS whereof this Participation Agreement has been entered into the day and year first above written.

本參與協議已在本文件首頁所列的日期簽訂，以茲證明。

For and on behalf of)
代表)
MASSMUTUAL TRUSTEES LIMITED)
美國萬通信託有限公司)
Jonas Wong – President)
黃俊良 – 總裁)

Signature of Personal Account Member)
個人帳戶成員簽署)
)
)
)

Full Name of Personal Account Member
個人帳戶成員全名

-End 完-

PARTICIPATION AGREEMENT FOR PERSONAL ACCOUNT MEMBER

個人帳戶成員參與協議

THIS PARTICIPATION AGREEMENT is made on _____(Date)

本協議於_____(日期)由下列雙方簽訂

BETWEEN 有關雙方:

- (1) **MASSMUTUAL TRUSTEES LIMITED**, whose registered office is at 4th Floor, MassMutual Tower, 38 Gloucester Road, Wanchai, Hong Kong (the “Trustee”); and 美國萬通信託有限公司，其註冊辦事處位於香港灣仔告士打道38號美國萬通大廈4字樓(下稱「受託人」)；及
- (2) _____(the “PM” 下稱「參與成員」).
(Full Name of Personal Account Member 個人帳戶成員全名)

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- (B) The PM wishes to join the Master Trust Scheme in order to establish a retirement benefits scheme (the “Participating Scheme”) for his or her own benefit as a personal account member.
參與成員希望以個人帳戶成員參與集成信託計劃，用以成立爲保障其利益之退休保障計劃(下稱「參與計劃」)。
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(Name of Personal Account Member)
to be governed by the terms of the Deed and this Participation Agreement.
參與成員現成立一個參與計劃名爲_____計劃生效日
(個人帳戶成員名稱)
爲 _____(Date日期)，並受有關契約及本參與協議的條款規限。

3. The PM hereby covenants with the Trustee to comply with and be bound by the provisions of the Deed and this Participation Agreement and all applicable laws and regulations.
參與成員現向受託人契諾遵守有關契約及本參與協議及所有適用法律和法規的規定並受其約束。
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5. Subject to the provisions of the Deed and this Participation Agreement, the PM undertakes and agrees to hold the Trustee indemnified against any and all proceeding, costs, charges, liabilities and expenses occasioned by any and all actions, claims, demands or proceedings in connection with the Master Trust Scheme or the Participating Scheme either:
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因參與成員違反第4條所述的保證而引起的；或
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他/她已得悉美國萬通保險亞洲有限公司(下稱「美國萬通亞洲」)是集成信託計劃的推銷商，其註冊辦事處位於香港灣仔告士打道38號美國萬通大廈12字樓。作為受託人的直屬控股公司，美國萬通亞洲是強制性公積金計劃管理局的註冊主事中介人(強積金中介人註冊號碼: IC000218)，主要經營人壽保險業務。
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為參與集成信託計劃，替參與成員填妥的「萬全強制性公積金計劃個人戶口申請書」(下稱「申請書」)當中提及的註冊強制性公積金附屬中介人(下稱「中介人」)是由美國萬通亞洲委任，負責分發集成信託計劃及邀請和誘使其他人仕作出與2012年強制性公積金(修訂)條例第34F(5)條中所述的事項有關的重要決定。

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按照有關契約第19條，本參與協議可被終止。

9. The Application Form shall form part of this Participation Agreement.
申請書將構成本參與協議的一部份。

10. Subject to the approval of the Mandatory Provident Fund Scheme Authority, the Trustee can amend this Participating Agreement from time to time by way of notice to the PM before any proposed amendments shall take effect.
在強制性公積金計劃管理局給予批准的規限下，受託人可對本參與協議不時作出修改，但須在任何建議中的修訂向參與成員發出通知。

11. This Participation Agreement shall be governed by the laws of Hong Kong.
本參與協議應受香港法律約束。

IN WITNESS whereof this Participation Agreement has been entered into the day and year first above written.

本參與協議已在本文件首頁所列的日期簽訂，以茲證明。

For and on behalf of)
代表)
MASSMUTUAL TRUSTEES LIMITED)
美國萬通信託有限公司)
Jonas Wong – President)
黃俊良 – 總裁)

Signature of Personal Account Member)
個人帳戶成員簽署)
)
)
)

Full Name of Personal Account Member
個人帳戶成員全名

-End 完-

NOTES TO TRANSFER BENEFITS BY SCHEME MEMBER
(for self-employed person, personal account holder or employee ceasing employment)**計劃成員轉移權益須知**
(適用於自僱人士、個人帳戶持有人或終止受僱的僱員)

Please read the following important information before you complete Form MPF(S)-P(M):

填寫第 MPF(S)-P(M) 號表格前，請先閱讀下列重要資料：

(1) **Definition of terms 用詞定義：**

- (a) "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.
「供款帳戶」一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。
- (b) "Personal account" - an account in an MPF scheme which is mainly used to receive the accrued benefits transferred from another account(s).
「個人帳戶」一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。
- (c) "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.
「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」）一指轉出你的累算權益的強積金計劃的受託人。
- (d) "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.
「新受託人」（在《規例》中亦稱「承轉受託人」）一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。
- (e) "Original scheme" - the MPF scheme from which your accrued benefits are to be transferred.
「原計劃」一指轉出你的累算權益的強積金計劃。
- (f) "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.
「新計劃」一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。

- (2) 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.

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。

- (3) 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.

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。

- (4) 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.

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。

- (5) If you wish to transfer-out the accrued benefits from your contribution account during employment, you should complete Form MPF(S)-P(P).

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。

- (6) 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.

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限規則選擇提取外，計劃成員應把帳戶內的所有累算權益整筆轉移。

- (7) Please complete Form MPF(S)-P(M) carefully as the administration procedures taken by the trustees may not be reversible.

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。

- (8) 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.

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。

- (9) 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.

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。

- (10) 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.

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。

Explanatory Notes on Scheme Member's Request For Fund Transfer Form (Form MPF(S)-P(M))
計劃成員資金轉移申請表(第 MPF(S)-P(M) 號表格)填報須知

- (1) If you do NOT possess a HKID Card, please fill in your name as shown on your passport.
如你沒有香港身份證，請填上你在護照上的姓名。
- (2) 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:
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：
- (a) in your membership certificate;
成員證明書；
 - (b) in your annual benefit statement; or
周年權益報表；或
 - (c) through the member enquiry facilities available from trustees.
受託人提供的成員查詢服務。
- If you are in doubt, please contact your original trustee or your employer.**
如有疑問，請聯絡你的原受託人或僱主。
- (3) 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.
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。
- (4) 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:
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：
- (a) in your membership certificate;
成員證明書；
 - (b) in your annual benefit statement; or
周年權益報表；或
 - (c) through the member enquiry facilities available from trustees.
受託人提供的成員查詢服務。
- 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.
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。
- (5) 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.
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。
- (6) 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.
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。

Please complete Form MPF(S)-P(M) at page 1 to page 2 and submit it (excluding the Explanatory Notes) to the new trustee after completion.

請填妥載於第 1 頁至第 2 頁的第 MPF(S)-P(M) 號表格，並提交該表格〔「填報須知」無須提交〕予新受託人。

SCHEME MEMBER'S REQUEST FOR FUND TRANSFER FORM
(for self-employed person, personal account holder or employee ceasing employment)
計劃成員資金轉移申請表
(適用於自僱人士、個人帳戶持有人或終止受僱的僱員)

Sections 145, 146, 147, 148 and 149 of the Mandatory Provident Fund Schemes (General) Regulation ("the Regulation")
 《強制性公積金計劃(一般)規例》(簡稱《規例》)第145、146、147、148及149條

- Please use **BLOCK LETTERS** to complete this Form. 請用英文大楷填寫本表格。
- *means delete whichever is inappropriate. Please insert "N.A." if not applicable. *請刪去不適用者。請在不適用處填上「不適用」。
- 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. 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。
- 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. 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。
- If necessary, you may seek assistance from the MASS MPF hotline at 2919 9115. 如有需要，歡迎致電萬全強積金熱線 2919 9115 查詢。

SECTION I – SCHEME MEMBER'S DETAILS 第I部 – 計劃成員資料

- Name (same as that shown on your Hong Kong Identity (HKID) Card^{Note 1}) : Mr./Mrs./Ms.* (英文)
 姓名(與香港身份證上的姓名相同^{註1}) : _____
 先生/太太/女士* (中文)
- Identification 身份證明 (a) HKID Card number 香港身份證號碼 : _____
 (b) Passport number 護照號碼 : _____
(ONLY for member without HKID Card) (本欄僅供沒有香港身份證的成員填寫)
- Contact Phone Number 聯絡電話號碼 : _____
- Correspondence address 通訊地址:

Flat/Room 室	Floor 樓層	Block 座	Name of Building 大廈
Street No. 街道號碼	Name of Street 街道		District 地區

SECTION II – FUND TRANSFER INFORMATION 第II部 – 資金轉移資料

- MPF account information in the original scheme 原計劃的強積金帳戶資料
 Name of original trustee^{Note 2} 原受託人名稱^{註2} : _____
 Name of original scheme^{Note 2} 原計劃名稱^{註2} : _____
 Type of MPF account (please select ONE of the following accounts and ✓ as appropriate):
 強積金帳戶類別 (請選擇以下其中一個帳戶並於適當方格內填上✓ 號):
☐ Personal account 個人帳戶 OR 或 ☐ Contribution account 供款帳戶
 Scheme member's account number^{Note 2} 計劃成員帳戶號碼^{註2} : _____
- Details of former employment (**applicable for employee who wishes to transfer-out the accrued benefits from a contribution account after cessation of employment**):
 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。):
 Name of former employer 前任僱主名稱 : _____
 Employer's identification number^{Note 3} 僱主的識別號碼^{註3} : _____
- Details of self-employed status (**applicable for self-employed person only**):
 自僱人士身份詳情 (只適用於自僱人士):
 Please indicate your reason of transfer and ✓ as appropriate 請說明你轉移的原因，並於適當方格內填上✓ 號
☐ Cessation of self-employment, with effect from 終止自僱，生效日期是

MM 月	DD 日	YYYY 年

☐ I will remain in self-employment and my accrued benefits will be transferred to another MPF scheme stated in section III(8). Contributions to the original scheme should be paid up to 本人將會維持自僱，並把本人的累算權益轉移至第 III(8)部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

MM 月	DD 日	YYYY 年

SECTION III – FUND TRANSFER OPTIONS 第 III 部 – 轉移資金的選擇

(8) MPF account information in the new scheme 新計劃的強積金帳戶資料:

I elect to transfer the accrued benefits derived from the mandatory contributions in my account stated in section II(5) to the following account (Please select option (a), (b) OR (c) and ✓ as appropriate):

本人選擇把在第 II(5)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 (請選擇(a), (b)或(c), 並於適當方格內填上✓號):

<input type="checkbox"/> (a) To my contribution account with my new employer 轉移至本人新僱主就本人開立的供款帳戶
Name of new trustee ^{Note 4} 新受託人名稱 ^{註 4} :
Name of new scheme ^{Note 4} 新計劃名稱 ^{註 4} :
Scheme member's account number ^{Note 4} 計劃成員帳戶號碼 ^{註 4} :
Name of new employer 新僱主名稱 :
Employer's identification number ^{Note 3} 僱主識別號碼 ^{註 3} :
<input type="checkbox"/> (b) To my designated account in the new scheme 轉移至本人新計劃內的指定帳戶
Name of new trustee ^{Note 4} 新受託人名稱 ^{註 4} :
Name of new scheme ^{Note 4} 新計劃名稱 ^{註 4} :
Scheme member's account number ^{Note 4} 計劃成員帳戶號碼 ^{註 4} :
<input type="checkbox"/> (c) Retained in the original scheme as personal account (where applicable) 以個人帳戶形式保留在原計劃 (如適用)

(9) Arrangement of my voluntary contributions ^{Note 5} (if any) in my account stated in section II(5).

有關本人在第 II(5)部所述帳戶內的自願性供款 ^{註 5} (如有) 的安排。

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

(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 section III(8). If there are no such benefits in your account and you have made an election in section III(9), the selected option will not be processed.)

(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 III(8)部的權益的同樣方式處理。如你已在第 III(9)部作出選擇, 而帳戶內並沒有該等權益, 則有關選擇將不會獲處理。)

<input type="checkbox"/> (a) Transferred together with the accrued benefits derived from the mandatory contributions as in section III(8). 與在第 III(8)部所述由強制性供款所產生的累算權益一併轉移。
<input type="checkbox"/> (b) Withdrawn in accordance with the governing rules of the original scheme. 按照原計劃的管限規則提取權益。
Method of payment (please ✓ as appropriate) 付款方式 (請在適當方格內填上✓號):
(i) <input type="checkbox"/> By cheque 支票付款
(ii) <input type="checkbox"/> 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.) 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。)
Name of bank account holder 銀行帳戶持有人姓名: _____
Name of bank 銀行名稱: _____
Bank account number 銀行帳戶號碼: _____

SECTION IV – TERMINATION OF MPF ACCOUNT WITH NO RESIDUAL BALANCE (IF APPLICABLE)**第 IV 部 – 終止沒有剩餘款項的強積金帳戶 (如適用)**

(10) I hereby give the original trustee an instruction to terminate my relevant MPF member account as referred to in section II(5) upon transfer of the full accrued benefits to the new trustee and there is no residual balance in the said account.

本人謹此指示原受託人在把本人於第 II(5)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。

SECTION V – AUTHORIZATION AND DECLARATION 第 V 部 – 授權及聲明

(11) 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. 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。

(12) I declare that 本人聲明:

(a) I have read the Notes to Transfer Benefits by Scheme Member; and

本人已閱讀《計劃成員轉移權益須知》的內容; 及

(b) to the best of my knowledge and belief, the information given in this Form is correct and complete.

盡本人所知所信, 本表格所提供的資料正確及詳盡。

Signature of the Scheme Member ^{Note 6} 計劃成員簽署 ^{註 6}

Date 日期

Date:

MassMutual Trustees Limited
4 //F, MassMutual Tower
38 Gloucester Road
Wan Chai, Hong Kon

Attn: MPF & Pensions Admin. Department

Re : Request of Change of Servicing Broker / Appointment of Servicing Broker

MPF Scheme Name Mass Mandatory Provident Fund Scheme

☐ Personal Account No. _____

☐ Self-Employed Scheme No. _____

☐ Employer Scheme No. _____

I / We _____, holder of _____
(HKID Card / Passport number / BR No.) hereby appoint **Sun Flower Insurance Brokers Limited** (Principal MPF Reg. No. CI000177 / Broker Code 1946) as my/our servicing intermediary with immediate effect to handle and follow the MPF/ORSO issues. The broker name, address and telephone number(s) are as follows:-

Sun Flower Insurance Brokers Limited
Room 1108, Hing Yip Commercial Centre,
272-284 Des Voeux Road Central, HK
Tel. : (852) 2521 1881
Fax : (852) 2521 1919
Contact Person: Lam Mei Wah, Vivian (Subsidiary MPF Reg. No. 074161)

There is no additional service charge to be imposed by the above-mentioned arrangement.

This appointment shall supersede all my/our previous appointment and valid until further notification from me/us. I/We reserve the right to terminate this appointment at any time by written notice.

Thank you for your kind attention and assistance.

Yours Faithfully,

Signature (with company chop if applicable)

美國萬通信託有限公司
香港灣仔告士打道三十八號
美國萬通大廈四樓樓

要求更換服務代理/服務代理人委任書

□ 僱主計劃編號

新華保險顧問有限公司
香港德輔道中 272-284
興業商業中心 1108 室
電話：(852) 2521 1881
傳真：(852) 2521 1919
聯繫人：林美華小姐 (強積金附屬中介人註冊號碼：074161)

此致

簽署（公司蓋印，如適用）

Date:

MassMutual Trustees Limited
4 //F, MassMutual Tower
38 Gloucester Road
Wan Chai, Hong Kon

Attn: MPF & Pensions Admin. Department

Re : Request of Change of Servicing Broker / Appointment of Servicing Broker

MPF Scheme Name Mass Mandatory Provident Fund Scheme

☐ Personal Account No. _____

☐ Self-Employed Scheme No. _____

☐ Employer Scheme No. _____

I / We _____, holder of _____
(HKID Card / Passport number / BR No.) hereby appoint **Sun Flower Insurance Brokers Limited** (Principal MPF Reg. No. CI000177 / Broker Code 1946) as my/our servicing intermediary with immediate effect to handle and follow the MPF/ORSO issues. The broker name, address and telephone number(s) are as follows:-

Sun Flower Insurance Brokers Limited
Room 1108, Hing Yip Commercial Centre,
272-284 Des Voeux Road Central, HK
Tel. : (852) 2521 1881
Fax : (852) 2521 1919
Contact Person: Lam Mei Wah, Vivian (Subsidiary MPF Reg. No. 074161)

There is no additional service charge to be imposed by the above-mentioned arrangement.

This appointment shall supersede all my/our previous appointment and valid until further notification from me/us. I/We reserve the right to terminate this appointment at any time by written notice.

Thank you for your kind attention and assistance.

Yours Faithfully,

Signature (with company chop if applicable)

美國萬通信託有限公司
香港灣仔告士打道三十八號
美國萬通大廈四樓樓

要求更換服務代理/服務代理人委任書

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電話：(852) 2521 1881
傳真：(852) 2521 1919
聯繫人：林美華小姐 (強積金附屬中介人註冊號碼：074161)

此更換服務代理通知將取代所有本人/本公司以前所發出的通知書，有效至另行通知。
我/我司有權在任何時候以書面方式終止此服務代理。

此致

簽署（公司蓋印，如適用）