FORM –PA-APP

PERSONAL ACCOUNT APPLICATION FORM for PRINCIPAL MPF SCHEME
信安強積金計劃 之 個人帳戶申請表

NOTE 注意:
This Application Form forms part of the Participation Agreement and shall only be used in conjunction with the Principal Brochure. The details specified in this form shall apply for the purposes of the Scheme. 本申請表將連同信安的主要推銷刊物一併使用，並爲參與協議書之一部份。申請表內的資料，將用於此計劃之事宜上。

1. Please tick and complete the appropriate sections. 請於適當位置及部份加上✓號
2. Please delete where inappropriate 請刪除不適用者

SECTION 1 第一部份 PARTICULARS OF SCHEME PARTICIPANT 計劃參與者資料

❑ Mr. 先生 ❑ Ms. 小姐

Name 姓名 (English 英文) *(must be identical to that on the HKID Card & please provide a copy of the document 必須與香港身份證上之姓名相符及請附上有關文件的副本。)*

Surname 姓

First Name 名

(Chinese 中文)

HKID Card No. 香港身份證號碼 ( )

Date of Birth 出生日期 (DD/MM/YYYY 日/月年)

Correspondence **Address** 通訊地址 *(please do not use P.O. Box address 請勿填寫郵政信箱地址)*

Flat /Room 室 Floor 樓 Block 座

Building / Estate Name 大廈 / 屋苑

Number & Name of Street 街號及名稱

District 地區 ❑ H.K 香港 ❑ Kln. 九龍 ❑ N.T. 新界 ❑ Others 其他

Home Tel. No. 住宅電話號碼 | **Mobile No. 手提電話號碼** | **Fax No. 傳真號碼** | **Email Address 電子郵箱**

❑ (Applicable to phone numbers starting with "5", "6" or "9" and with SMS support ONLY) I wish to register **Principal e–Channel Service** to receive pension account balance via Principal Mobile SMS on a quarterly basis . (只適用以「5」、「6」或「9」字作爲第一個號碼並可支援接收短訊服務的手機) 本人欲登記信安 e – Channel 服務以透過手機短訊，每季度收取個人退休帳戶的結餘資訊。

❑ Chinese 中文 ❑ English 英文 Language for SMS messages 接收短訊服務資訊之語言 (**Note 注意:** If no option is selected, it is default to use Chinese 如無指示，將預設爲中文。)

SECTION 2 第二部份 PRINCIPAL MPF SCHEME APPLIED FOR 申請信安強積金計劃*(only one series can be selected 只可選擇一項系列)*

Constituent Funds 基金種類		❑ Series 800 系列		❑ Series 600 系列	
		MC	VC	MC	VC
Principal Capital Guaranteed Fund 信安資本保證基金	(CGF)				
Principal Long Term Guaranteed Fund 信安長線保證基金	(LTGF)				
Principal MPF Conservative Fund 信安強積金保守基金	(MCF)				
Principal HK Dollar Savings Fund信安港元儲蓄基金	(HKDSF)				
Principal Asian Bond Fund 信安亞洲債券基金	(ABF)				
Principal Hong Kong Bond Fund信安香港債券基金	(HKBF)				
Principal International Bond Fund 信安國際債券基金	(IBF)				
Principal Stable Yield Fund 信安平穩回報基金	(SYF)				
Principal Long Term Accumulation Fund 信安長線增值基金	(LTAF)				
Principal Global Growth Fund 信安環球增長基金	(GGF)				
Principal US Equity Fund 信安美國股票基金	(USEF)				
Principal Asian Equity Fund 信安亞洲股票基金	(AEF)				
Principal China Equity Fund 信安中國股票基金	(CEF)				
Principal Hang Seng Index Tracking Fund 信安恒指基金	(HSITF)				
Principal Hong Kong Equity Fund 信安香港股票基金	(HKEF)				
Principal International Equity Fund 信安國際股票基金	(IEF)				
Total percentage 百份比總和		**100%**	**100%**	**100%**	**100%**

Remarks 備註:
1. MC = Mandatory Contribution / Minimum MPF Benefits 強制性供款 / 最低強積金利益 , VC = Voluntary Contribution 自願性供款
2. If this part is not completed or total Investment Allocation does not equal to 100%, the Trustee will invest all contributions in the default fund of the scheme: – (i.e. **Principal HK Dollar Savings Fund for Series 600 or 800**). 如無適當指示或投資分配總數不等於 100%，受託人會將所有供款投資在指定基金內 — (即 **600 及 800 系列爲信安港元儲蓄基金**)。
3. Percentages indicated must be an integer and add up to 100% in total under each column. 所示之比例必須爲整數，而每欄總和必須爲 100%。

Please attach (i) a photocopy of my HKID card for verification and (ii) Scheme Member's Request For Fund Transfer Form MPF(S)-P(M) completed with full information for processing. 請附上 (i) 身份證副本作核實身份證號碼之用，並 (ii) 附上已填妥之計劃成員轉移基金申請表 MPF(S)-P(M)。

Signed this 簽於 _________ (day 日) day of ____________ (month 月) ,20 _______ (year 年)

Signed by the **Scheme Participant 計劃參與者**簽署

*CASE-SEPARATOR**DEFKBC-NBPRSER* *OBJTNBAPPFORM*

Trustee: Principal Trust Company (Asia) Limited 受託人: 信安信託(亞洲)有限公司
Administrator: Principal Insurance Company (Hong Kong) Limited 管理人: 美國信安保險有限公司
27/F, Hopewell Centre, 183 Queen's Road East, Hong Kong 香港皇后大道東183號合和中心27樓
Tel No.電話號碼：(852) 2827-1233 Fax No.傳真號碼：(852) 2827-1707 Website網址 : www.principal.com.hk

PARTICIPATION AGREEMENT

THIS PARTICIPATION AGREEMENT is made on

BETWEEN:

(1) **PRINCIPAL TRUST COMPANY (ASIA) LIMITED** whose registered office is at Unit 1001-1003, Central Plaza, 18 Harbour Road, Wanchai, Hong Kong (the "Trustee"); and

(2) The applicant, whose name and address are given in the Application Form attached hereto (the "**Scheme Participant**").

RECITALS:

(A) The Trustee is the Trustee of the Principal MPF Scheme selected in the Application Form (the "Master Trust Scheme").

(B) The Scheme Participant wishes to establish a personal account in the Master Trust Scheme so as to hold the Personal Account Member's accrued benefits in respect of his former employment or former self-employment.

(C) The participation of the Scheme Participant in the Master Trust Scheme shall be governed by the trust deed of the Master Trust Scheme as amended from time to time (the " Deed") and this Participation Agreement.

PROVISIONS:

1. Unless otherwise stated, words and expressions used in this Participation Agreement shall have the meanings given to them in the Deed.

2. The Scheme Participant hereby participates in the Master Trust Scheme with effect from____________________________, the participation is to be governed by the terms of the Deed and this Participation Agreement.

3. The Scheme Participant 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.

4. The Scheme Participant warrants that he/she has read and fully understood the content of the Principal Brochure and the Application Form (including the Personal Information Collection Statement) and that the information contained in the Application Form and other information from time to time to be provided by the Scheme Participant are correct in all respects.

5. The Scheme Participant further declares that he/she understands that Principal Trust Company (Asia) Limited ("the Trustee") intends to use his/her name and all contact details for direct marketing of mandatory provident fund ("MPF") products and MPF related services as stated in the Personal Information Collection Statement. He/She also understands that the Trustee cannot make such use of his/her personal data without his/her consent and will cease to use his/her personal data for direct marketing purpose upon his/her written or verbal request. The Scheme Participant hereby expresses his/her consent to the use of his/her name and all contact details (as provided/updated by him/her from time to time) by the Trustee (and its agents) for the aforesaid direct marketing purpose. The Scheme Participant further understand that should he/she find such use of his/her personal data not acceptable, he/she should indicate his/her objection by ticking "✓" the box below.

   ☐ The Scheme Participant objects to the proposed use of his/her personal data in direct marketing.

6. Subject to the provisions of the Deed and this Participation Agreement, the Scheme Participant undertakes and agrees to hold the Trustee indemnified against any and all proceedings, costs, charges, liabilities and expenses occasioned by any and all actions, claims, demands or proceedings in connection with the Master Trust Scheme either:

   (a) arising out of the breach by the Scheme Participant of the warranty referred to in paragraph 4; or

   (b) as a result of any failure or omission on the part of the Scheme Participant 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 Scheme Participant.

7. The Scheme Participant undertakes and agrees to pay all fees and expenses which are payable by it under the terms of the Deed and this Participation Agreement.

8. This Participation Agreement shall be terminated in accordance with Rule 20 of the Deed.

9. This Participation Agreement shall be governed by the laws of Hong Kong.

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

Signed by the Scheme Participant	For and on behalf of **PRINCIPAL TRUST COMPANY (ASIA) LIMITED**
______________________________	______________________________
Signature	**Authorized Signature(s)**

參與協議書

本參與協議書是於 ________________ 由以下雙方所簽訂

(一) 信安信託〔亞洲〕有限公司〔“受託人”〕，其註冊地址位於香港灣仔港灣道十八號中環廣場 1001 至 1003 室及

(二) [申請人]〔“計劃參與者”〕，其名稱/姓名及註冊地址填寫在計劃之申請表格內。

引述:

(甲) 受託人乃個人帳戶成員於申請表內所選擇的信安強積金計劃〔“集成信託計劃”〕的信託人。

(乙) 計劃參與者現欲參與集成信託計劃，以持有個人帳戶成員以往受僱或自僱的累算權益。

(丙) 計劃參與者的參與是受集成信託計劃所不時修改的統一信託契據(“契據”)及本參與協議書管限。

條款:

一. 除另有所指外，本參與協議書所用字詞的意思均以契據爲準。

二. 計劃參與者現參與集成信託計劃，於________年_____月_____日生效，並由契據及本參與協議書的條款所管限。

三. 計劃參與者現與受託人立約承諾遵從並受制於契據及本參與協議書的條款及適用的法律和規例。

四. 計劃參與者已閱畢並完全明白信安主要推銷刊物及申請表(包括個人資料收集說明書)之內容，並保證申請表所載的資料及所有由其提供的資料均爲確實毋誤。

五. 計劃參與者並且聲明已明白信安信託(亞洲)有限公司(「受託人」)擬使用他/她的姓名及所有聯絡資料以作出個人資料收集說明書內所述的直接促銷強制性公積金(「強積金」)產品及強積金相關服務。他/她亦明白受託人在未得他/她的同意之前不能如此使用他/她的個人資料，受託人倘接獲他/她之書面或口頭要求，將停止使用他/她的個人資料作直接促銷用途。計劃參與者現在明確表示同意受託人（及其代理）使用他/她的姓名及所有聯絡資料(由他/她不時提供/更新)作上述直接促銷用途。計劃參與者進一步明白，如他/她不接受他/她的個人資料用作此用途，他/她應在以下方格內加上「✓」號，以表示反對。

☐ 計劃參與者反對他/她的個人資料被使用於擬作出的直接促銷。

六. 計劃參與者除受制於契據及本參與協議書的限制條款外，亦同意承擔補償受託人任何及所有由於以下原由而引致與集成信託計劃或有關計劃參與者參與集成信託計劃的訴訟、索償或要求所帶來的訴訟費、費用、收費、責任及花費：

(a) 計劃參與者違反條款四所承諾的保證；或

(b) 任何由於計劃參與者疏忽或遺忘依時履行或遵守契據及本參與協議書訂定的責任或其他與計劃參與者相關的責任。

七. 計劃參與者同意承擔支付所有按契據及本參與協議書條款而需其支付的費用及花費。

八. 本參與協議書可按契據內第二十條條款而終止。

九. 本參與協議書是受香港法律所管限。

計劃參與者簽署	**信安信託(亞洲)有限公司**
______________________________	______________________________
簽署	**授權人簽署**

Personal Information Collection Statement

The information and other personal data collected from you from time to time will be used for the purposes of:

(1) processing your application for participation in Principal MPF Scheme Series 600 or 800 ("the Scheme");
(2) administering and managing your contributions and accrued benefits under the Scheme;
(3) carrying out your instructions or responding to any enquiries given or purporting to be given by you or on your behalf;
(4) direct marketing of mandatory provident fund ("MPF") products of Principal Trust Company (Asia) Limited ("the Trustee") and MPF related services;
(5) providing MPF related services;
(6) maintaining statistical data and providing a database for product and market research;
(7) compliance with applicable laws and regulations; and
(8) any other purposes relating or incidental to the above.

The provision of information and other personal data by you is on a voluntary basis. However, failure to provide us with the information and other personal data as requested may result in your application/instruction not being able to be processed.

Your personal information may be transferred/disclosed to the following parties (whether within or outside the Hong Kong Special Administrative Region) for any of the purposes stated above:

(1) Principal Insurance Company (Hong Kong) Limited as administrator of the Scheme ("the Administrator");
(2) any agent, contractor, third party service provider, or any company(ies) within the same companies group to which the Trustee belongs ("the member company(ies)") which provides administrative, telecommunications, computer, marketing, professional or other services to the Trustee/Administrator in connection with their business operations;
(3) any person to whom the Trustee/Administrator is under an obligation to make disclosure under the requirements of any law binding on the Trustee/Administrator or any of the member companies or under and for the purposes of any guidelines issued by regulatory or other authorities with which the Trustee/Administrator or the member companies are expected to comply; and
(4) any actual or proposed assignee of the Trustee or participant or sub-participant or transferee of the Trustee's rights in respect of the client.

Under the Personal Data (Privacy) Ordinance, you have a right to request access to and correction of any of your personal information held by the Trustee and to request not to use your personal data for direct marketing purpose as stated above. The aforesaid requests can be made in writing to:

Data Protection Officer
Principal Trust Company (Asia) Limited
27/F, Hopewell Centre,
183 Queen's Road East,
Hong Kong

If you have any questions or wish to know more about our privacy policy, please send your enquiry to the above address or contact us at 2827-1233.

個人資料收集說明書

向閣下所收集的資料及其他個人資料將會用作下列用途：

(1) 處理閣下參與信安強積金計劃600或800系列(「本計劃」)的申請；
(2) 處理及管理閣下於本計劃的供款及累算權益；
(3) 執行閣下的指示或答覆閣下或閣下代表的查詢；
(4) 直接促銷信安信託(亞洲)有限公司(「受託人」)的強制性公積金(「強積金」)產品及強積金相關服務；
(5) 提供強積金相關服務；
(6) 維持統計數據及用作產品及市場研究資料庫；
(7) 遵守有關法律及規則；及
(8) 用作與任何上述有關的用途。

閣下提供的資料及其他個人資料純屬自願性質。然而，如未能提供所需資料及其他個人資料，可能導致閣下的申請／指示不獲處理。

閣下的個人資料可能轉移/披露予以下的人士 (不論在香港特別行政區內外) 作為上述所載的任何用途：

(1) 本計劃的管理人美國信安保險有限公司(「管理人」)；
(2) 在業務上向受託人/管理人提供行政、電訊、電腦、市場推廣、專業或其他任何服務的代理、承包商、第三方服務供應商或受託人所屬公司集團旗下的任何公司(「成員公司」)；
(3) 就受託人/管理人或成員公司所需遵守的法律要求，或按監管機構或其他主管機構要求受託人/管理人或成員公司需遵守的指引，受託人/管理人因而有責任要向其披露的任何人士；及
(4) 允許任何受託人的實際或建議承讓人或受託人所持客戶權益的分享者、再分享者、受讓人擁有有關客戶資料的權利。

根據個人資料(私隱)條例，閣下有權要求查閱及更正受託人所持有閣下的個人資料及要求閣下的個人資料不被用作上述的直接促銷用途。上述要求可以書面形式通知

保障資料主任
信安信託(亞洲)有限公司
香港皇后大道東183號合和中心27樓

閣下如有任何疑問或欲進一步了解本公司的私隱政策，請致函到上述地址或致電2827-1233與本公司聯絡。

Principal® 信安

NOTES TO TRANSFER BENEFITS BY SCHEME MEMBER
for **PRINCIPAL MPF SCHEME S500 / S600 / S800** of
PRINCIPAL TRUST COMPANY (ASIA) LIMITED
信安信託（亞洲）有限公司
信安強積金計劃 **500 / 600 / 800** 系列
計劃成員轉移權益須知

(for self-employed person, personal account holder or employee ceasing employment)
（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」—指強積金計劃下主要用以接收僱主爲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」—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」)—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」)—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」—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」—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，因爲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。

Continued on next page (請轉到下頁)

(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爲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爲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編號，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編號，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) and submit it (excluding the Explanatory Notes) to the new trustee after completion.
請填妥第 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。

Continued on next page (請轉到下頁)

Personal Information Collection Statement

The information and other personal data collected from you from time to time will be used for the purposes of:

(1) processing your application for participation in Principal MPF Scheme Series 500 / 600 or 800 ("the Scheme");
(2) administering and managing your contributions and accrued benefits under the Scheme;
(3) carrying out your instructions or responding to any enquiries given or purporting to be given by you or on your behalf;
(4) direct marketing of mandatory provident fund ("MPF") products of Principal Trust Company (Asia) Limited ("the Trustee") and MPF related services;
(5) providing MPF related services;
(6) maintaining statistical data and providing a database for product and market research;
(7) compliance with applicable laws and regulations; and
(8) any other purposes relating or incidental to the above.

The provision of information and other personal data by you is on a voluntary basis. However, failure to provide us with the information and other personal data as requested may result in your application/instruction not being able to be processed.

Your personal information may be transferred/disclosed to the following parties (whether within or outside the Hong Kong Special Administrative Region) for any of the purposes stated above:

(1) Principal Insurance Company (Hong Kong) Limited as administrator of the Scheme ("the Administrator");
(2) any agent, contractor, third party service provider, or any company(ies) within the same companies group to which the Trustee belongs ("the member company(ies)") which provides administrative, telecommunications, computer, marketing, professional or other services to the Trustee/Administrator in connection with their business operations;
(3) any person to whom the Trustee/Administrator is under an obligation to make disclosure under the requirements of any law binding on the Trustee/Administrator or any of the member companies or under and for the purposes of any guidelines issued by regulatory or other authorities with which the Trustee/Administrator or the member companies are expected to comply; and
(4) any actual or proposed assignee of the Trustee or participant or sub-participant or transferee of the Trustee's rights in respect of the client.

Under the Personal Data (Privacy) Ordinance, you have a right to request access to and correction of any of your personal information held by the Trustee and to request not to use your personal data for direct marketing purpose as stated above. The aforesaid requests can be made in writing to:

Data Protection Officer
Principal Trust Company (Asia) Limited
27/F, Hopewell Centre,
183 Queen's Road East,
Hong Kong

If you have any questions or wish to know more about our privacy policy, please send your enquiry to the above address or contact us at 2827-1233.

個人資料收集說明書

向閣下所收集的資料及其他個人資料將會用作下列用途：

(1) 處理閣下參與信安強積金計劃500/600或800系列 (「本計劃」)的申請；
(2) 處理及管理閣下於本計劃的供款及累算權益；
(3) 執行閣下的指示或答覆閣下或閣下代表的查詢；
(4) 直接促銷信安信託(亞洲)有限公司(「受託人」)的強制性公積金(「強積金」)產品及強積金相關服務；
(5) 提供強積金相關服務；
(6) 維持統計數據及用作產品及市場研究資料庫；
(7) 遵守有關法律及規則；及
(8) 用作與任何上述有關的用途。

閣下提供的資料及其他個人資料純屬自願性質。然而，如未能提供所需資料及其他個人資料，可能導致閣下的申請／指示不獲處理。

閣下的個人資料可能轉移/披露予以下的人士 (不論在香港特別行政區內外) 作爲上述所載的任何用途：

(1) 本計劃的管理人美國信安保險有限公司(「管理人」)；
(2) 在業務上向受託人/管理人提供行政、電訊、電腦、市場推廣、專業或其他任何服務的代理、承包商、第三方服務供應商或受託人所屬公司集團旗下的任何公司(「成員公司」)；
(3) 就受託人/管理人或成員公司所需遵守的法律要求，或按監管機構或其他主管機構要求受託人/管理人或成員公司需遵守的指引，受託人/管理人因而有責任要向其披露的任何人士；及
(4) 允許任何受託人的實際或建議承讓人或受託人所持客戶權益的分享者、再分享者、受讓人擁有有關客戶資料的權利。

根據個人資料(私隱)條例，閣下有權要求查閱及更正受託人所持有閣下的個人資料及要求閣下的個人資料不被用作上述的直接促銷用途。上述要求可以書面形式通知

保障資料主任
信安信託(亞洲)有限公司
香港皇后大道東183號合和中心27樓

閣下如有任何疑問或欲進一步了解本公司的私隱政策，請致函到上述地址或致電 2827-1233 與本公司聯絡。

Continued on next page (請轉到下頁)

THIS PAGE INTENTIONALLY LEFT BLANK
此頁刻意留白

Continued on next page (請轉到下頁)

MPF(S)-P(M)

SCHEME MEMBER'S REQUEST FOR FUND TRANSFER FORM
for **PRINCIPAL MPF SCHEME S500 / S600 / S800** of
PRINCIPAL TRUST COMPANY (ASIA) LIMITED
信安信託（亞洲）有限公司
信安強積金計劃 **500 / 600 / 800** 系列
計劃成員資金轉移申請表

(For self-employed person, personal account holder or employee ceasing employment)（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

Important Notice 重要事項:
1. The personal data you supply may, for the purpose(s) of processing your election(s) of transfer as requested in this Form 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被用作處理你在本表格內要求的轉移選擇，或直接與此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。
2. During the transfer of accrued benefits between different MPF accounts of Principal MPF Scheme Series 600 and Principal MPF Scheme Series 800, change of units between Class D and Class I may occur. For details, please refer to the Principal Brochure of the Scheme. 在信安強積金計劃 600 及 800 系列下之不同强積金賬戶於累算權益轉移時，可能涉及 I 類別單位及 D 類別單位的相互轉變，詳情請參閱計劃的主要推銷刊物。
3. If you would like to request a copy of the Principal Brochure of your selected scheme, please contact our Customer Service Department at 2827-1233 for a copy. 如欲索取信安強積金計劃的主要推銷刊物， 歡迎致電本公司客戶服務部 2827-1233。

Please use BLOCK LETTERS to complete this Form. 請以正楷填寫本表格

SECTION I 第一部份 — SCHEME MEMBER'S DETAILS 計劃成員資料

(1) Scheme Member's Name 成員姓名 (same as that shown on HKID Card Note 1) (與香港身份證上的姓名相同註 1) ______ Surname 姓氏 ______ Other Name 名字

(2) HKID Card Number 香港身份證號碼: ______ *Passport Number 護照號碼: ______
(*Passport Number only for member without HKID Card 護照號碼僅供沒有香港身份證的成員填寫)

(3) Telephone Number 電話號碼 ______ (4) Mobile Number 手提電話號碼 ______

(5) Fax Number 傳真號碼 ______ (6) E-mail Address 電郵地址 ______

(7) Correspondence Address 通訊地址 ______

SECTION II 第二部份 — FUND TRANSFER INFORMATION 資金轉移資料 — MPF Account Information in the Original Scheme: 原計劃的強積金帳戶資料:

(1) Name of Original Trustee Note2 原受託人名稱註 2 ______

(2) Name of Original Scheme Note2 原計劃名稱註 2 ______

(3) Type of MPF Account 強積金帳戶類別 (Please ✓ the appropriate box 請在適當方格內加✓) ❑ Personal Account 個人帳戶 ❑ Contribution Account 供款帳戶

(4) Scheme Member's Account Number Note2 計劃成員帳戶號碼註 2 ______

(5) 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。）
Employer's Identification Number Note3 僱主識別號碼註 3 ______
Name of Former Employer 前僱主名稱 : ______

(6) Transfer Reason (For self-employed persons only. Please ✓ the appropriate box.) 轉移原因 (只適用於自僱人士，請在適當空格內加✓。)

❑ Ceased to be self-employed with effect from 終止自僱的生效日期 是 : ______ (DD/MM/YYYY 日/月/年)

❑ I will remain in self-employment and my accrued benefits will be transferred to another MPF scheme stated in section III. 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三部份所述的另一個強積金計劃。本人向原計劃供款至最後日期是 : ______ (DD/MM/YYYY 日/月/年)

SECTION III 第三部份 — FUND TRANSFER OPTIONS 轉移資金的選擇 — 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 to the following account (Please select and ✓ option (1), (2) or (3)) 本人選擇把在第 II 部份所述帳戶內由強制性供款所產生的累算權益轉移至以下選擇帳戶（請選擇並 ✓ 選擇(1)，(2)或(3)）:

❑ **Option 選擇 1** –
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）。

❑ **Option 選擇 2** –
To my designated account in the new scheme 轉移至本人新計劃內的指定帳戶:

(1) Name of New Trustee Note4 新受託人名稱註 4 ______

(2) Name of New Scheme Note4 新計劃名稱註 4 ______

(3) Scheme Member's Account Number Note4 計劃成員帳戶號碼註 4 ______

Continued on next page (請轉到下頁)

DEFKBC-TRFOUTMBR *OBJTTRFOUTEXT*

☐ **Option 選擇 3 –**

To my contribution account with my new employer as follows 轉移到本人新僱主就本人開立的供款帳戶:

(1) Name of New Employer 新僱主名稱 ____________________

(2) Employer's Identification Number [Note3] 僱主識別號碼[註 3] ____________________

(3) Name of New Trustee [Note4] 新受託人名稱[註 4] ____________________

(4) Name of New Scheme [Note4] 新計劃名稱[註 4] ____________________

(5) Scheme Member's Account Number [Note4] 計劃成員帳戶號碼[註 4] ____________________

SECTION IV 第四部份	ARRANGEMENT OF VOLUNTARY CONTRIBUTIONS [Note5] (IF ANY) IN MY ACCOUNT STATED IN SECTION II 有關本人在第二部份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 備註 ： 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. If there are no such benefits in your account and you have made an election under section IV, the selected option will not be processed. 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的權益的同樣方式處理。如你已在第四部份作出選擇，而帳戶內並沒有該等權益，則有關選擇將不會獲處理。

☐ (a) to be transferred together with the accrued benefits derived from the mandatory contributions as in section III 與在第三部份所述由強制性供款所產生的累算權益一併轉移。

☐ (b) to be withdrawn in accordance with the governing rules of the original scheme and such payment 根據有關原計劃之管限規則以下列方式提取：

☐ by cheque and mail to the correspondence address as shown above. 用支票支付及郵寄到上述之通訊地址。

☐ 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。）:

(1) Bank No. 銀行編號 ☐☐☐ (2) Branch No. 分行編號 ☐☐☐ (3) Account No. 帳戶號碼 ☐☐☐☐☐☐☐☐☐

(4) Name of Bank Account 銀行戶口姓名 ____________________
(cannot be a joint name account of the scheme member 必須為計劃成員之非聯名戶口)

(5) Name of Bank 銀行名稱 ____________________

SECTION V 第五部份	TERMINATION OF MPF ACCOUNT WITH NO RESIDUAL BALANCE (IF APPLICABLE) 終止沒有剩餘款項的強積金帳戶 (如適用)

I hereby give the original trustee an instruction to terminate my relevant MPF member account as referred to in section II 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二部份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 VI 第六部份	AUTHORIZATION AND DECLARATION 授權及聲明

(1) 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. 本人同意積金局可爲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。

(2) 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。

SECTION VII 第七部份	IMPORTANT NOTE 重要備註

For electing Principal MPF Scheme only 只適合選擇信安強積金計劃之成員：

I acknowledge that I have read and fully understood the content of the Principal Brochure and the Summary of Constituent Funds and Fees & Charges of the selected Scheme and I agree to the Terms and Conditions pertaining to it. 本人承認已閱讀及了解信安強積金計劃簡介之內容及本人同意有關計劃之條款。

To avoid processing delay, please 爲使閣下之申請能盡快辦理，請 ☜

☑ **enclose a photocopy of your HKID Card / Passport for verification in lieu of presenting your HKID Card / Passport in person and, 附上香港身份證/護照副本以作核實，因此閣下無須爲受託人的核對工作親身出示身份證/護照，及**

☑ **send** this form to your new trustee. However, if you select Option 3, you may either provide this form to your new employer or to the new trustee. 遞交此表格予新受託人。倘若選定選擇 3，閣下可遞交此表格予新僱主或新受託人。

____
Date (dd/mm/yyyy) 日期 (日/月/年)

____
Signature of Personal Account Member / Scheme Member [Note6]
個人帳戶成員或計劃成員簽署[註 6]

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

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 <u>by mail</u>.*

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 <u>one</u> 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 **<u>valid for one month</u>** 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**」。如閣下爲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 1501A及1508室	星期一至五：上午8時45分至下午5時45分	星期六、日及公眾假期休息
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		
諮詢處	九龍油麻地加士居道36號勞資審裁處G01室	星期一至五：上午9時至下午1時 下午2時至下午5時	

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<u>信函</u>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：3146 7367

(4) 爲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<u>本人</u>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，提交的證明文件須爲香港身分證）。不相符或逾期的身分證明文件將不獲接納。

g. 本表格的<u>**有效期爲一個月**</u>（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，乃爲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。

表格 Form PA-AP

Request For Personal Account Information
Authorization Form

查閱個人帳戶資料
授權書

Particulars of the Scheme Member 計劃成員資料	
Name In English 英文姓名	
Name In Chinese 中文姓名	
HKID / Passport No.* 香港身分證/護照號碼*	* Please provide copy of HKID / Passport 請附上香港身分證/護照副本
Day-time Telephone No. 日間聯絡電話	
Authorization & Declaration **授權及聲明**	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). 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. 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。 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。
	Signature 簽署 Date (DD/MM/YY) 日期 (日/月/年)

Particulars of the Authorized Person 獲授權人資料	
Name In English 英文姓名	
Name In Chinese 中文姓名	
HKID / Passport No.* 香港身分證/護照號碼*	* Please provide copy of HKID / Passport for mail/fax enquiry 如郵遞/傳真遞交，請附上香港身分證/護照副本
Day-time Telephone No. 日間聯絡電話	
Mail results to this address 請將結果寄往此地址	
Declaration **聲明**	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. 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。
	Signature 簽署 Date (DD/MM/YY) 日期 (日/月/年)

Note:
附註: 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.

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
	☐ ICC ☐ NB ☐ MP1 ☐ MC1 ☐ 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 ☐ Mr 先生 ☐ Mrs 太太 ☐ Miss 小姐 ☐ Ms 女士 ☐ 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 ☐ Primary or below小學或以下學歷 ☐ 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*"):
作爲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 “新華保險顧問有限金司” (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” 必須以極爲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爲止。

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________________	____________	X________________	____________
Signature of customer 客戶簽署	Date 日期	Signature of sales staff 銷售員工簽署	Date 日期