

APPLICATION FORM for PRINCIPAL MPF SCHEME (EMPLOYER)

信安強積金計劃申請表格 (僱主)

TO: PRINCIPAL INSURANCE COMPANY (HONG KONG) LIMITED
致: 美國信安保險有限公司

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，並為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。

Please tick and complete the appropriate sections. 請於適當位置及部份加上✓號

(FOR OFFICE USE ONLY 公司專用)

- Principal MPF Scheme Series 600 信安強積金計劃 600 系列
 Principal MPF Scheme Series 800 信安強積金計劃 800 系列

Serial No.

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

(1) Legal Name 法定名稱

(please use registered name under Business Registration 請根據商業登記證上之名稱填寫)

(2) Business / Other Government
Registration No.
商業 / 其他政府登記證號碼

(e.g. 例如 BR 12345678-000)

(please provide a copy 請附上副本)

BR - Business Registration 商業登記
ED - Education Department 教育署
IR - Inland Revenue Department (Charitable Organization) 稅務局 (慈善機構)
SO - Society Office of HK Police (Societies) 香港警務處社團事務處 (社團)
TU - Registry of Trade Unions 職工會登記局
OT - Others 其他

(3) Organization type
機構類別

- Sole proprietorship 獨資經營
 Partnership 合夥
 Limited company 有限公司
 Others 其他

(4) Name of Contact Person
聯絡人姓名

Mr. 先生 / Ms. 女士

(5) Title of Contact Person
聯絡人職銜

(6) Nature of Business
業務性質

(7) Telephone No.
電話號碼

(8) Email Address (if any)
電郵地址 (如有)

(9) Facsimile No.
傳真號碼

(10) Business Registered Address
商業登記地址

(11) Mailing Address
通訊地址

(please provide if address is different from Business Registration 如與商業登記證不同，請填寫通訊地址)

SECTION 2 – PARTICULARS OF MPF PLAN
第二部份 強積金計劃詳情

(12) New / Transferred Plan 新/ 轉移計劃

- Newly set up plan 新成立計劃
Principal MPF Plan Effective Date
信安強積金計劃生效日期

Day 日 Month 月 Year 年

- Transferred from other service provider – (please also complete the 'Participating Employer's Request for Fund Transfer Form' (MPF(S)-P(E))
轉移自其他服務提供者 – (請另外填寫[參與僱主資金轉移申請表] (MPF(S)-P(E))

MPF Plan First Establishment Date
強積金計劃首次成立日期

Day 日 Month 月 Year 年

Effective date of Transfer (i.e. Principal MPF Plan Effective Date)
轉移生效日期 (即信安強積金計劃生效日期)

Day 日 Month 月 Year 年



CASE-SEPARATOR *DEFKBC-NBER* *OBJTNBAPPFORM*

(13) Payroll Details 糧期資料:

Payroll Frequency 出糧週期	Payroll Period End Date 糧期最後日	
<input type="checkbox"/> Monthly 每月一次	<input type="checkbox"/> on the last day of each month 每月的最後一日	<input type="checkbox"/> Others, please specify _____ (e.g. 22 nd day) 其他, 請註明 (例如: 22 號)
<input type="checkbox"/> Semi-Monthly 每半月一次	<input type="checkbox"/> on the 15 th and last day of each month 每月的第 15 日及最後一日	<input type="checkbox"/> Others, please specify _____ 其他, 請註明
<input type="checkbox"/> Bi-Weekly 每兩週一次	<input type="checkbox"/> first payroll period end date after the Plan Effective Date 計劃生效後的首個糧期之最後日	Day 日 Month 月 Year 年
<input type="checkbox"/> Weekly 每星期一次	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday 星期一 星期二 星期三 星期四 星期五 星期六 星期日	

(14) Contributions Payment Method 供款方法

- By Cheque 支票 By Autopay 自動轉帳 (please complete Direct Debit Authorization Form 請填寫 直接付款授權書)

SECTION 3 – INSTRUCTIONS FOR VOLUNTARY CONTRIBUTION (Please ✓ the appropriate box(es) and provide details)
第三部份 自願性供款指引 (請於適當方格內加上✓號及提供詳情)

(15) **Voluntary Contribution Available** – to commence at the same time as Mandatory Contribution

可作自願性供款 - 必須與強制性供款同一時間開始

- Yes 會 (please complete Voluntary Contribution Application Form 請填寫 自願性供款申請表格)
 No 不會

SECTION 4 – ROLLOVER CASE (must be completed in order for transfer to be effected)
第四部份 轉換現有計劃 (必須填妥以下部份, 計劃之轉移方可生效)

	Attached 已附上	Will follow 將隨後呈交
Participating Employer's Request For Fund Transfer Form (MPF(S)-P(E)) 參與僱主資金轉移申請表 (MPF(S)-P(E))	<input type="checkbox"/>	<input type="checkbox"/>
A complete list of Transferred Members or Authorization Letter to Transferee Trustee 轉移成員名單 或 授權信致原有計劃受託人	<input type="checkbox"/>	<input type="checkbox"/>
(a) Previous Service Provider Name 原有之計劃服務提供者名稱	_____	
(b) Previous Scheme Name 原有之計劃名稱	_____	
(c) It is hereby confirmed that: 現確認:		
<input type="checkbox"/> there is NO REDUCTION of the accrued rights or vested benefits of the scheme's members as a result of the scheme transfer from the previous service provider. 未有因轉移計劃而損害本計劃成員的累算權益或既有利益。		
<input type="checkbox"/> there is alteration on the accrued rights or vested benefits of the scheme to the detriment of scheme's members as a result of the scheme transfer from the previous service provider and the consent of the member will be / have been * (*please delete where inappropriate) obtained from not less than 90% of the scheme's member concerned. 因轉移計劃而對本計劃成員的累算權益或既有利益有修改, 並將會 / 已* (*請刪除不適用者) 獲得該計劃 90% 或以上的有關成員同意。		

SECTION 5 – FEES AND CHARGES (please refer to the Offering Document)
第五部份 收費與費用 (請參閱有關銷售文件)

Annual Fee for S800 \$ _____ is attached. 附上 800 系列之年費港幣 _____ 元

Signed this _____ day of _____, 20____
簽於 (day 日) (month 月) (year 年)

For and on behalf of the Scheme Participant
代表計劃參與者

Authorized Signature(s) with company chop
授權人簽署及公司蓋章

Name & Title in print
姓名及職銜

(FOR OFFICE USE ONLY 公司專用)

Signature of Licensed MPF Intermediary
強積金中介人簽署

MPF Intermediaries Reg. No.
強積金中介人註冊號碼

Name in print
簽署人姓名

Contact Tel. No.
聯絡電話

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 join the Master Trust Scheme for the benefit of the Scheme Participant and/or his/her employees.
- (C) The participation of the Scheme Participant 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 Plan Effective Date as specified in Section 2 of the Application Form, 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 in relation to contributions and as to the age, salary, length of service, benefits, Investment Elections, Switching Instruction Forms are correct in all respects.
5. 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 and his/her participation 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 and his/her Employee Members (where applicable) (whether they relate to the Scheme Participant and such Employee Members alone or together with another Scheme Participant and the Employee Members).
6. 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.
7. This Participation Agreement shall be terminated in accordance with Rule 20 of the Deed.
8. 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.

For and on behalf of the Scheme Participant

For and on behalf of
PRINCIPAL TRUST COMPANY (ASIA) LIMITED

Authorized Signature(s) with company chop

Authorized Signature(s)

Name & Title in print

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) 受託人乃計劃參與者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，為計劃參與者或其僱員成立退休保障。
- (丙) 計劃參與者的參與是由集成信託計劃所不時修改的信託契據〔統稱“契據”〕及本參與協議書所管限。

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為準。
- 二. 計劃參與者現參與集成信託計劃，其生效日期〔計劃生效日期〕已填寫在計劃之申請表格的第二部份內，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供款資料，包括年齡、薪酬、服務年資、福利、投資選擇、更改投資選擇通知書及其他相關資料均為確實毋誤。
- 五. 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因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：
 - 甲. 計劃參與者違反條款四所承諾的保證；或
 - 乙. 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及僱員成員相關的責任〔不論單與計劃參與者及其僱員成員相關，或與其他計劃參與者及其僱員成員相關〕。
- 六. 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。
- 七. 本參與協議書可按契據內第二十條條款而終止。
- 八. 本參與協議書是受香港法律所管限。

代表計劃參與者

信安信託(亞洲)有限公司

授權人簽署及公司蓋章

授權人簽署

簽署人姓名及職銜

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。

Personal Information Collection Statement

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

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- (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
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- (2) 處理及管理閣下於本計劃的供款及累積權益；
- (3) 執行閣下的指示或答覆閣下或閣下代表的查詢；
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- (8) 用作與任何上述有關的用途。

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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。

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 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。

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OBJTNBSIGN

Name of Employer 僱主名稱:

Contract No. 合約編號:

Effective Date 生效日期:

AUTHORIZATION 授權

Our Company hereby authorizes the signature(s) and/or the email account(s) below is/are valid for all pension related documents until superseded by a later authorization.

本公司現授權下列人士之簽署及/或透過該電子郵箱傳送之有關退休金文件均為有效，此聲明將有效至新申報通知為止。

Authorized Signature* with company chop
認可簽署及公司印鑑

Date (dd/mm/yyyy)
日期 (日/月/年)

Full Name 全名:

Title 職銜:

* For Corporation, need to be signed by a Director or authorized signer of the Master Application Form 倘為法人公司, 必須由董事或計劃申請表格簽署人簽署

* For Sole Proprietorship Company, need to be signed by the Sole Proprietor 倘為獨資經營公司, 必須由獨資經營者簽署

* For Partnership Company, need to be signed by any one of the partners 倘為合伙經營公司, 必須由任何一位合伙人簽署

AUTHORIZED OFFICER(S) 授權人簽署

1. Add 新增

Delete 刪減

Full Name 全名:

Full Name 全名:

Title 職銜:

Email Address 電子郵箱:

Signature 簽署:

2. Add 新增

Delete 刪減

Full Name 全名:

Full Name 全名:

Title 職銜:

Email Address 電子郵箱:

Signature 簽署:

3. Add 新增

Delete 刪減

Full Name 全名:

Full Name 全名:

Title 職銜:

Email Address 電子郵箱:

Signature 簽署:

Continued on next page (請轉移到下頁)

MINUTES OF BOARD RESOLUTION 董事會議記錄 (if applicable 如適用)

Company Name 公司名稱

Minutes of the Meeting of Directors of the Company held on _____ [dd/mm/yyyy]
此乃本公司董事會議記錄在 _____ [日/月/年]

date 日期

at _____ .
於 _____ 舉行。
Address 地址

PRESENT 出席

CHAIRMAN 主席

RESOLVED 決議

1. Authorized person(s) to the administration of the MPF Scheme has/have been appointed / removed.
獲授權處理強積金計劃行政的人士已被委任 / 暫免。
2. The note be taken to furnish a signed / certified copy of the Minutes and the Authorized Officer Signature Form with Principal Insurance Company (Hong Kong) Limited for their records.
一份已簽署及證明此會議記錄的副本及授權簽署式樣將給予美國信安保險有限公司作為記錄保存。
3. This concludes the business of the Meeting.
本會議就此結束。

APPROVED 核准

Signature of Chairman 主席簽署



Direct Debit Authorization
for **PRINCIPAL MPF SCHEME S600 / S800/ S500**
信安強積金計劃 600 / 800/ 500 系列之
直接付款授權書



- I/We hereby authorize my/our below-named Bank to effect transfers from my/our account to that of the named beneficiary ❶ in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below.
 - I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.
 - I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s).
 - I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorization at any time on one week's written notice.
 - This authorization shall have effect until further notice or until the expiry date written below (whichever shall first occur).
 - I/We agree that any notice of cancellation or variation of this authorization which I/We may give to my/our Bank shall be given at least two months prior to the date on which such cancellation/variation is to take effect and at the same time such notice shall be given to the beneficiary.
- 本人/吾等現授權本人/吾等之下述銀行，(根據受益人或其往來銀行不時給予本人/吾等銀行之指示)自本人/吾等之賬戶內轉賬予受益人。惟每次轉賬金額不得超過以下指定之限額。
 - 本人/吾等同意本人/吾等之銀行毋須證實該等轉賬通知是否已交予本人/吾等。
 - 如因該等轉賬而令本人/吾等之賬戶出現透支(或令現時之透支增加)，本人/吾等願共同及各承擔全部責任。
 - 本人/吾等同意如本人/吾等之賬戶並無足夠款項支付該等授權轉賬，本人/吾等之銀行有權不予轉賬，且銀行可收取慣常之收費，並可隨時以一星期書面通知取消本授權書。
 - 本授權書將繼續生效直至另行通知為止或直至下列到期日為止(以兩者中最早之日期為準)。
 - 本人/吾等同意，本人/吾等取消或更改本授權書之任何通知，須於取消/更改生效日最少兩個月前交予本人/吾等之銀行並受益人。

My/Our Bank Name 本人/吾等之銀行之名稱:		Branch Name 銀行分行之名稱:	
Bank No. 銀行編號:	Branch No. 分行編號:	My/Our Account No. 賬戶號碼:	
My/Our Name(s) as recorded on Statement/Passbook 本人/吾等在結單/存摺上所紀錄之名稱			
❷ BR/CI/HKID/Passport No. 商業登記/公司註冊證書/身份證/護照號碼		❸ ID Type 證明類別	
❹ Limit for Each Payment 每次付款之限額: H K \$		❺ Expiry Date: 到期日(日/月/年) D D M M Y Y Y Y	
My/Our Address as recorded on Statement/Passbook 本人/吾等在結單/存摺上所紀錄之地址:			
Name of Participating Employer/ Self-Employed Person 參與僱主/自僱人士名稱		❻ My/Our Signature(s) 本人/吾等之簽名	
Contract No. 合約編號: Principal Insurance Co (HK) Ltd		Date 日期:	
For Bank Use Only 銀行專用	Remarks:	Signature Verified	

Note 附註

- Named Beneficiary 受益人:

Scheme Name 計劃名稱	Account Name 賬戶名稱	Account No. 賬戶號碼
Principal MPF Scheme Series 600 信安強積金計劃 600 系列	PTC-MPF S600	08521581
Principal MPF Scheme Series 800 信安強積金計劃 800 系列	PTC-MPF S800	08521689
Principal MPF Scheme Series 500 信安強積金計劃 500 系列	PTC-MPF S500	17930847
- Enter the identification used for bank account opening and enter ID type. Debtor's bank uses this information for verification purpose only. For limited company, please fill in the CI No. For partnership or sole proprietor business, please fill in the BR No. 填上開戶時使用的身份證明號碼及其證明類別。付款人的銀行會作為核實用途。若轉賬戶口屬有限公司，必須填寫公司註冊證書號碼。若屬合夥人或獨資業務，請填寫商業登記證號碼。
- I = HKID 香港身份證, P = Passport, B = Business Registration, C = Certificate of Incorporation, X = Others 其他
- If the amount of your payment are likely to vary each time, set the Limit for Each Payment at the maximum amount you would expect to pay at any one time. 如台端付款之數額每次可能不相同，則請將最高者定為每次付款之最高限額。
- This DDA will be cancelled automatically on the date included in the box marked "Expiry Date". If you wish the DDA to have effect indefinitely (or until cancelled by you), please leave box blank. 本直接付款授權書將於「到期日」一欄中所填寫之日期自動撤銷。如貴戶欲直接付款授權書無限期有效(或直至貴戶予以撤銷為止)，則請將該欄留空。
- Please ensure that your signature in this form is the same as yours on your Bank Account. 請保證貴戶在此授權書內之簽名與銀行賬戶所簽者完全相同。

* **SPECIAL REMARKS 重要事項:**

Any payment through direct debit is subject to the final approval by Principal Insurance Company (Hong Kong) Limited. 如台端選用銀行戶口直接付款，需得到美國信安保險有限公司之最後核准。

Please take note of the following when applying for direct debit payment service:

1. Your designated bank account for the autopay service must be a bank in Hong Kong and in Hong Kong currency.
2. By signing this application, the applicant hereby confirms that he/she has obtained the irrevocable consent from the joint account holder (if any) of the account mentioned in this application to authorise Principal Trust Company (Asia) Limited to effect the transfer of the contribution payment as contemplated under this application from the said account in such manner as provided under this application
3. If you have made any alterations on the authorization form, please sign against the altered column to signify your consent to the change.
4. As the banks take approximately 2 months to verify the direct debit account information, the first 2 months payment for set up of new account or change of account details will have to be settled by check.
5. The employer must submit the remittance statement or contribution listing and all the member change information to Principal within 5 calendar days after the contribution period end day.
6. The Self-Employed Person must submit the latest income assessment and contribution mode to Principal at least 1 month before each financial year end, i.e. 31 December (for Principal MPF Scheme Series 600 and 800) or 31 March (for Principal MPF Scheme Series 500).
7. For any unsuccessful debit, the payment can be settled by check or contact us to arrange adhoc direct debit instruction.
8. Any default, discrepancy on contribution, surcharge or payment of fees & charges can be settled by check or contact us to arrange adhoc direct debit instruction.
9. Any payment through direct debit is subject to the final approval by Principal Insurance Company (Hong Kong) Limited.

選用銀行戶口直接付款服務該注意之事項:

1. 台端所指定用作扣除金額的戶口須以港元為計算單位，及該銀行必須於本港設有業務。
2. 如採用聯名戶口轉賬，在簽署本直接付款授權書時，台端確認已取得該聯名戶口另一方戶口持有人的同意，授權信安信託（亞洲）有限公司，可從該聯名戶口直接扣除足夠金額，支付供款、附加費及有關費用。
3. 如直接付款授權書上有任何塗改，台端需於修正項目旁簽署以示同意。
4. 鑒於銀行約需兩個月時間核對直接付款戶口資料，台端於新成立戶口或更改戶口資料後的首兩個月供款必須以支票繳交。
5. 僱主必須於供款期結束後的第五個曆日前向信安提交付款結算書或成員供款資料及成員資料更改之內容。
6. 自僱人士必須於每財政年度結束日，即十二月三十一日（適用於信安強積金計劃 600 及 800 系列）或三月三十一日（適用於信安強積金計劃 500 系列）的最少一個月前向信安提交最新之有關入息證明及供款方式。
7. 台端請以支票繳付任何未獲直接付款接納的有關供款及費用或聯絡本公司安排臨時直接付款指示。
8. 任何尚欠供款、附加費及費用或其差額，台端請以支票繳付或聯絡本公司安排臨時直接付款指示。
9. 如台端選用銀行戶口直接付款，需得到美國信安保險有限公司之最後核准。

Remarks: This important notice is for the reference and retention by the employer or Self-Employed who has applied for direct debit payment service.
備註: 僱主或自僱人仕若申請銀行戶口直接付款服務，請參閱並保留此重要通知。

SECTION A 甲部 (to be completed by Employee 請由僱員填寫)

Note 注意：

- ◆ In order to process your enrolment, you must complete all shaded fields in the form and sign it. 為處理閣下的申請，閣下必須填妥表內灰色欄中所有資料，並簽署本表格。
- ◆ To speed up your enrolment, you can submit the form with a photocopy of your HKID card. 閣下在遞交本表格時，可以附上閣下的香港身份證副本，以加快處理閣下的登記申請。
- ◆ Please use blue or black ball pen and complete the form in BLOCK LETTERS 請以藍色或黑色原子筆及**正楷**填寫此表格。
- ◆ Any corrections you make on this form **must be** initialed. 如須作出任何刪改，請於刪改之位置旁簽署。

Part I - Personal Information 個人資料

Employer Name 僱主名稱 _____		
Employee Name* 僱員姓名* (English 英文) 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) ____/____/____	Sex 性別 <input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女
Correspondence Address 通訊地址 (This address will automatically apply to ALL accounts maintained with Principal 此地址將自動適用於所有於信安登記之賬戶。)		
Flat/Rm 室 _____	Floor 樓 _____	Block 座 _____
Building / Estate Name 大廈 / 屋苑 _____		
Number & Name of Street 街道及名稱 _____		
District / Country 地區 / 國家 _____		
<input type="checkbox"/> H.K. 香港 <input type="checkbox"/> KLN. 九龍 <input type="checkbox"/> N.T. 新界 <input type="checkbox"/> Others 其他		
Home Tel. No. 住宅電話 _____	Mobile / Pager No. 手提 / 傳呼號碼 _____	
Fax No 傳真號碼 _____	E-mail Address 電郵地址 _____	
<input type="checkbox"/> (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 monthly basis. (只適用以「5」、「6」或「9」字作為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，每月收取個人退休帳戶的結餘資訊。 <input type="checkbox"/> Chinese 中文 <input type="checkbox"/> 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，將預設為中文。)		

* Must be identical to that on the Hong Kong Identity Card. 必須與香港身份證上之姓名相符。

Part II - (Optional) Voluntary Contribution (選擇性)自願供款 (To be completed only if applicable 於適用時填寫)

Note 注意：

- ◆ Member needs to understand that this contribution is in addition to the voluntary contribution as required under the plan rules. Besides, the accrued benefit of the voluntary contributions cannot be withdrawn until employment with your employer is ceased. 成員明白此乃額外供款，並不包括計劃條款之自願供款內。此外，閣下在與僱主終止僱員合約前，不能提取自願性供款之累算權益。

Commencing with such contribution due, I elect this amount 本人現決定選擇性供款金額如下：

- equal to _____% of my [Relevant Income / Monthly Income]* (*please cross out where inapplicable); or 相當於本人 [有關入息 / 每月入息]* (*請刪除不適用者)的百分之_____；或
- be a flat amount of HK\$_____ 固定金額為港幣_____

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DEFKBC-NBENRMBR *OBJTNBENRMBR*

Part III - Investment Details 投資詳情

Note 注意：

- ◆ If this part is not completed or the total investment allocation does not equal to 100%, the Trustee will invest all contributions in the Default Fund - Principal HK Dollar Savings Fund 倘並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於指定基金-信安港元儲蓄基金。
- ◆ Member needs to complete column (I) & (II) (if applicable). The percentage allocation of types of contribution applies to both Employer's and Employee's Fund Accumulations and Future Contributions. 成員必須填妥下列第(I)及第(II)欄(如適用)。供款類別之投資基金分配比例適用於僱主供款及僱員的所有累積款項及新供款。
- ◆ The acquisition or surrender of units of all constituent funds will take place within 7 business days from the date of receipt of this form or the Effective Date of Enrolment, whichever is later. 所有投資基金單位之買賣，將於此表格之收件日期或參加生效日期(以較後者為準)7個工作天內進行。

Contributions shall be invested in the following manner: 供款按下列分配投資:

Constituent Fund(s) 成份基金	Abbreviation 簡稱	(I) % of Mandatory [†] Contribution 強制性供款之百分比 [†]	(II) % of Voluntary [†] Contribution 自願性供款之百分比 [†]
Principal Capital Guaranteed Fund 信安資本保證基金	(CGF-800)	%	%
Principal Long Term Guaranteed Fund 信安長線保證基金	(LTGF-800)	%	%
Principal MPF Conservative Fund 信安強積金保守基金	(MCF-800)	%	%
Principal HK Dollar Savings Fund 信安港元儲蓄基金	(HKDSF-800)	%	%
Principal Hong Kong Bond Fund 信安香港債券基金	(HKBF-800)	%	%
Principal International Bond Fund 信安國際債券基金	(IBF-800)	%	%
Principal Stable Yield Fund 信安平穩回報基金	(SYF-800)	%	%
Principal Long Term Accumulation Fund 信安長線增值基金	(LTAF-800)	%	%
Principal Global Growth Fund 信安環球增長基金	(GGF-800)	%	%
Principal US Equity Fund 信安美國股票基金	(USEF-800)	%	%
Principal Asian Equity Fund 信安亞洲股票基金	(AEF-800)	%	%
Principal China Equity Fund 信安中國股票基金	(CEF-800)	%	%
Principal Hang Seng Index Tracking Fund 信安恒指基金	(HSITF-800)	%	%
Principal Hong Kong Equity Fund 信安香港股票基金	(HKEF-800)	%	%
Principal International Equity Fund 信安國際股票基金	(IEF-800)	%	%
Total Percentage allocated 分配百分比總和		100%	100%

[†] Percentage indicated must be integers and must add up to 100% in total under each Column. 所示之比例必須為整數，而每欄總和必須為 100%。

Part IV – Declarations 聲明

1. I hereby agree to indemnify the Trustee against any action, proceeding, claim, loss, damage, cost or expense which may be brought against the Trustee or suffered or incurred by the Trustee arising either directly out of or in connection with the Trustee accepting facsimile instructions and acting thereon, whether or not the same are confirmed by me in writing, unless due to the wilful default or gross negligence of the Trustee. 本人同意並授權受託人接受傳真指示及根據指示處理有關事宜。除因蓄意或大意疏忽，受託人無須因此而直接或間接負上任何責任、賠償、損失或費用。Notwithstanding the previous paragraph, the Trustee has the right to determine which forms or other documents of instructions may or may not be accepted by facsimile. 受託人有權決定接受何種傳真表格或指示。
2. I hereby acknowledge that I have read and fully understood the content of the Personal Information Collection Statement as attached hereto. 現特此確認本人已閱畢並完全明白所附的個人資料收集說明書。

Continued on next page (請轉移到下頁)

3. I understand that Principal Trust Company (Asia) Limited (“the Trustee”) intends to use my 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. I also understand that the Trustee cannot make such use of my personal data without my consent and will cease to use my personal data for direct marketing purpose upon my written or verbal request. I hereby express my consent to the use of my name and all contact details (as provided/updated by me from time to time) by the Trustee (and its agents) for the aforesaid direct marketing purpose. I further understand that should I find such use of my personal data not acceptable, I should indicate my objection by ticking “✓” the box below.

I object to the proposed use of my personal data in direct marketing.

本人明白信安信託(亞洲)有限公司(「受託人」)擬使用本人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。本人亦明白受託人在未得本人的同意之前不能如此使用本人的個人資料,受託人倘接獲本人之書面或口頭要求,將停止使用本人的個人資料作直接促銷用途。本人現在明確表示同意受託人(及其代理)使用本人的姓名及所有聯絡資料(由本人不時提供/更新)作上述直接促銷用途。本人進一步明白,如本人不接受本人的個人資料用作此用途,本人應在以下方格內加上「✓」號,以表示反對。

本人反對本人個人資料被使用於擬作出的直接促銷。

4. I hereby authorize my Employer to deduct any regular contribution and optional voluntary contribution (if any) from my salary for the corresponding period and agree to the rules of the Scheme. 本人授權僱主在本人之薪金中扣除任何既定供款及額外供款(如有),並同意本計劃之規則。

Signature of Employee 僱員簽署

(This signature will be used to verify your future correspondence to us

此簽署式樣將用於核對閣下日後給予本公司之文件)

Date 日期

Please return the Form to your employer to complete Section B.
請閣下將表格交回僱主填寫本表乙部。

Continued on next page (請轉移到下頁)

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 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。

Continued on next page (請轉移到下頁)

SECTION B 乙部 (to be completed by Employer 請由僱主填寫)**Part I - Employee Personal Information 僱員個人資料** (If Section A has been completed by the Employee, please move on to Part II. 如僱員已填妥甲部，請到第二部份繼續填寫。)

Employee Name * 僱員姓名 * (English 英文)		(Chinese 中文)	
Surname 姓			
First Name 名			
HKID Card No. 香港身份證號碼	Date of Birth * 出生日期 * (DD/MM/YYYY 日/月/年)	Sex 性別	
		<input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女	
Correspondence Address 通訊地址			
Flat / Rm 室	Floor 樓	Block 座	
Building / Estate Name 大廈 / 屋苑			
Number & Name of Street 街道及名稱			
District / Country 地區 / 國家			
<input type="checkbox"/> H.K. 香港 <input type="checkbox"/> KLN. 九龍 <input type="checkbox"/> N.T. 新界 <input type="checkbox"/> Others 其他			
Home Tel. No. 住宅電話		Mobile / Pager No. 手提 / 傳呼號碼	
Fax No. 傳真號碼		E-mail Address 電子郵箱	

* Must be identical to that on the Hong Kong Identity Card 必須與香港身份證上之姓名相符。

Part II – Employment Information 受僱資料

Employer Name 僱主名稱		
Contract No. 合約編號	Member Number (if assigned by Employer) 成員編號(若由僱主指定)	
Date of Employment 受僱日期 (DD/MM/YYYY 日/月/年)	Vesting Start Date 服務年資起計日 # (DD/MM/YYYY 日/月/年)	
Department Code (if any) 部門編號 (如有)	Grade/Class No. 職級/級別 #	
Actual Relevant Income for the 1 st Month 首月實際有關入息	Monthly Income 每月入息 #	
Employee Type 僱員類別 (Please ✓ the appropriate box 請在適當空格填上✓ 號)		
<input type="checkbox"/> New employee 新僱員	<input type="checkbox"/> Inter-group transfer 內部調職	<input type="checkbox"/> Expatriate employee 海外僱員
<input type="checkbox"/> Rejoined employee 重新受聘的僱員		Date joined Scheme (for Expatriate employee only) 參與計劃日期 (只適用於海外僱員)
		dd/mm/yyyy (日/月/年)
Special Remarks 備註		

Complete only if Employer will make voluntary contributions to the Plan. 如僱主將對計劃作出自願性供款才須填寫。

For and on behalf of the Employer

Authorized Signature with company chop
授權簽署及公司蓋印

Date 日期

Name of Employer 僱主名稱: _____

Contribution Period 供款期: From 由: _____ to 至 _____

Telephone No 電話號碼: _____

Contract No 合約編號: _____

Person to Contact 聯絡人: _____

Fax No 傳真號碼: _____

HK ID/ Passport No. 身份證號碼	Member Name (Lastname, Firstname) 成員姓名 (姓·名)	For new member only 只適用於新僱員			Relevant Contribution Period 有關供款期		Monthly Relevant Income 每月有關入息	Relevant Contribution (HKD) 有關供款			Terminated members 離職僱員*			
		Date of Birth 出生日期 dd/mm/yy	Date of Employment 受僱日期 dd/mm/yy	Residential Address 住宅地址	From 由	To 至		Contribution Type 供款類別	Employer's Account 僱主戶口 (a)	Employee's Account 僱員戶口 (b)	Last Day of Employment 最後受僱日期 ddmmyy	Termination Reason 離職原因 #	SP/LSP Offset (Y/N) 抵消服務費/ 長期服務金 (是/否)	
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								MC 強制性						
								VC 自願性						
								(I) Sub-total 小計						
								(II) Contribution Surcharge (s), if applicable 供款款付加費, 如適用						
								(I + II) GRAND TOTAL 總額						

For and on behalf of the Employer

Authorised Signature with Company Chop 授權簽署及公司印鑑

Date 日期



*** Important Notice 重要事項：**

1. Please return the **Payment Cheque and Remittance Statement** to Principal Insurance Company (HK) Limited, 27/F, Hopewell Centre, 183 Queen's Road East, Hong Kong
請將支票及供款結算書寄回：香港皇后大道東183號合和中心27樓，美國信安保險有限公司。
2. Surrender of units of all Investment Funds will take place upon the complete receipt of (1) all required documents for termination; (2) last contributions and/or contribution surcharge; or (3) the last date of employment, whichever is later.
所有投資基金單位之賣出將於(1)所需文件收訖後；(2)最後供款及或供款附加費收訖後；及(3)最後受僱日後處理，以較後之日期為準。
3. All required documents for termination include fund transfer form, member claim form with supporting documents, member's written acknowledgement of SP/LSP payment as listed in the Administration Guide.
根據行政指引，終止成員福利全部所需文件包括累算權益轉移申報表格，成員索償表格及證明文件，成員遣散費或長期服務金之收訖證明。
4. Employees who do not have any relevant income (such as those on no-paid leave) should also be reported in this part. 僱主仍需申報沒有入息(例如無薪休假)的僱員資料。
5. Please contact our Customer Service Department at 2827-1233 for enquiry. 如有任何垂詢，歡迎致電本公司客戶服務部2827-1233。

Remarks:

Termination Reason 離職原因:

- | | |
|---|--|
| 1. Normal Retirement 正常退休 | 8. Summary Dismissal and withholding of the Employer's Benefit 解僱及不給予僱主部份的利益 |
| 2. Late Retirement 延遲退休 | 9. Summary Dismissal and no withholding of the Employer's Benefit 解僱及給予僱主部份的利益 |
| 3. Early Retirement 提早退休 | 10. Redundancy / Laid Off 遣散 |
| 4. Inter Group Transfer 調任聯繫 / 附屬公司 | 11. Resignation 辭職 |
| 5. Permanent Departure from Hong Kong 永久性離開香港 | 12. Dismissal 解僱 |
| 6. Death 身故 | 13. Expiration of Employment Contract 合約到期 |
| 7. Total Incapacity 完全喪失工作能力 | 14. Others (Please specify) 其他原因 (請註明) |

Scheme Name 計劃名稱

Principal MPF Scheme Series 500 - 信安強積金計劃500系列
Principal MPF Scheme Series 600 - 信安強積金計劃600系列
Principal MPF Scheme Series 800 - 信安強積金計劃800系列

Pavee Name 支票抬頭

PTC - MPF S500
PTC - MPF S600
PTC - MPF S800

Important Notice in Respect of SP/LSP Offset 抵銷遣散費/長期服務金的重要事項

If yes, the Employer should note that (i) the severance payment or long service payment ("SP/LSP") paid to the terminated employees are calculated in accordance with the relevant provisions of the Employment Ordinance (Cap.57) ("Ordinance"), (ii) the amount of SP/LSP so paid is to be offset against the accrued benefits arising from the employer contributions paid by the Company in respect of these terminated employees under the MPF Scheme set up by the Employer; and (iii) such offset is made in accordance with the relevant provisions of the Ordinance. (Member's written acknowledgement of SP/LSP paid by the Employer with affirmation to the aforesaid conditions must be attached, otherwise processing cannot be effected.)

如有，僱主須注意 (i) 僱主必須按照《僱傭條例》(第57章) ("條例") 計算及支付遣散費或長期服務金予離職成員；(ii) 有關之遣散費或長期服務金，須從離職成員於本公司成立之強積金計劃的僱主供款的累算權益中作出抵銷；(iii) 此項抵銷是根據條例內的有關條款作出處理。(請附上成員遣散費或長期服務金之收訖證明，並確認上述條款，否則有關程序將無法完成。)

PLEASE NOTE 注意：

To ensure our receipt of Remittance Statement and Cheque payment on time, please send it out 2-3 working days before Contribution Due Day (i.e. 7th or 8th day of each month) if it is by ordinary post. Please also make sure your new employee is enrolled under your MPF scheme within the first 60 days of her employment. The duly completed member enrollment form or the following member data for the new employee must be provided on or before the relevant Contribution Due Day. Otherwise, it will also be regarded as late contribution submission. (1) member name; (2) member's HKID no.; (3) date of birth; (4) date of employment 為確保我們能準時收妥供款結算書及支票供款，如你是以平郵方式遞交，請提前於供款到期日前2至3個工作天寄出(如每月7號或8號)。同時，你必須確保新僱員於受僱的首60日內加入你的強積金計劃。新僱員所填妥的成員登記表格或以下的新僱員資料必須於供款到期日前提供。否則亦會被視為逾期供款。(1)新成員之全名；(2)新成員之身份證號碼；(3)出生日期；(4)受僱日期

信安e-Channel服務

登記信安e-Channel服務 享用免費手機短訊及電郵資訊提示

信安深明您的退休需要。信安一向致力為您提供全面優質的退休金及資產管理服務，以及貼心實用的增值服務。我們誠意為您推介信安 e-Channel 服務。

信安 e-Channel
服務



只需登記信安 e-Channel 服務，您將透過登記的手機號碼接收定期個人退休金帳戶結餘資訊，**費用全免**。您更可透過電郵通訊獲取投資錦囊、定期推廣及尊享優惠資訊。

有關信安 e-Channel 服務詳情，請瀏覽 www.principal.com.hk。

請即行動！登記信安 e-Channel 服務！

信安 e-Channel 服務登記表格

致：信安信託(亞洲)有限公司

傳真：(852) 2827 1707

本人欲登記信安 e-Channel 服務。

姓名：_____ 公司名稱：_____

手提電話號碼：_____ 香港身份證/護照號碼：_____

電郵地址：_____

本人欲以下列語言接收信安 e-Channel 資訊：

英文 中文

本人明白信安信託(亞洲)有限公司(「受託人」)擬使用本人的姓名及所有聯絡資料以作出下列個人資料收集說明書內所述的直接促銷用途。本人亦明白受託人在未得本人的同意之前不能如此使用本人的個人資料，受託人倘接獲本人之書面或口頭要求，將停止使用本人的個人資料作直接促銷用途。本人現在明確表示同意受託人(及其代理)使用本人的姓名及所有聯絡資料(由本人不時提供/更新)作上述直接促銷用途。本人進一步明白，如本人不接受本人的個人資料用作此用途，本人應在以下方格內加上「✓」號，以表示反對。

本人反對本人個人資料被使用於擬作出的直接促銷。

成員簽署：_____ 日期：_____

備註：

1. 信安短訊服務只適用於以「5」、「6」或「9」字作為第一個數字的手機號碼及可支援接收短訊服務的手機型號。
2. 填妥登記表格後請傳真到 (852) 2827 1707 或郵寄至香港皇后大道東183號合和中心27樓(請註明: 退休金營運部收)。
3. 客戶必須了解並接受用電子媒體傳送訊息的一切可能涉及的風險，包括但不限於短訊提示 / 電子訊息被截取、監視、修改或未經閣下授權而向他人發送或披露。

個人資料收集說明書

就強積金計劃成員而言

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(「強積金計劃」)的申請；
- (2) 處理及管理閣下於強積金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。

就職業退休計劃成員而言

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) 處理閣下參與受託於受託人的職業退休計劃(「職業退休計劃」)的申請；
- (2) 處理及管理閣下於職業退休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) 直接促銷受託人的退休產品及服務；
- (5) 提供退休產品相關服務；
- (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。

就強積金計劃及職業退休計劃成員而言

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) 有關強積金計劃/職業退休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。

APPLICATION FORM for PRINCIPAL MPF SCHEME SERIES 800
**(SPECIAL VOLUNTARY CONTRIBUTIONS)
信安強積金計劃 800系列之特別自願性供款申請表格**
NOTE 注意:

- This Application Form shall only be used in conjunction with the Principal Brochure. The details specified in this form shall apply for the purposes of Principal MPF Scheme Series 800 ("the Scheme"). 本申請表將連同信安的主要推銷刊物一併使用。申請表內的資料，將用於此計劃之事宜上。
- Please return this application form and a photocopy of your HKID card together with your cheque (if any) to Principal. 請將身份證副本及支票(如有)連同本申請表格一併遞交本公司。
- Special Voluntary Contributions Member may withdraw the account balance of not more than 4 times in each financial year free of charge. Additional withdrawal will be subject to a handling charge of HK\$300 for each withdrawal and the said fees will be deducted from the withdrawal value. 在每個財政年度內，特別自願性供款之成員可從帳戶內免費提取款項不超過四次，額外提款則按次從提款中扣除港幣三百元之手續費。

(FOR OFFICE USE ONLY 公司專用)

Serial No.

SECTION 1 – 第一部份		PARTICULARS OF SCHEME PARTICIPANT 計劃參與者資料	
<input type="checkbox"/> Mr. 先生 <input type="checkbox"/> Ms. 女士	Name 姓名¹ (English 英文) 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) _____	
Residential Address 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 _____			
Correspondence Address 通訊地址 (If different from above) (如與上述不同) _____			
Home Telephone No. 聯絡電話號碼 _____		Mobile No. 手提電話號碼 _____	
Email Address 電子郵箱 _____		Fax No. 傳真號碼 _____	
		Please provide the member no. if you are an Existing Member 倘若閣下是現有成員，請填上成員編號 _____	

¹ Must be identical to that on the Hong Kong Identity Card

必須與香港身份證之姓名相符

SECTION 2 – 第二部份	REGULAR CONTRIBUTION 定期供款
(1) Monthly Regular Contribution 每月定期供款 HK\$ 港幣 _____ 元 (subject to a minimum of HK\$500 最低金額為港幣 500 元) Payment must be made by autopay and the direct debit date will be on the 15 th day of each month or if it is not a banking business day, the following banking business day. The completed and signed autopay set up takes approximately 2 months and Principal will notify you of the date to effect the autopay. 上述供款必須透過直接付款方式繳付，供款的扣帳日為每月 15 號，倘若當天不是銀行工作天，則順延至下一個工作天扣帳。辦理直接付款手續約需時 2 個月，本公司會另函通知閣下直接付款生效日期。	
(2) You may attach cheque payment for the first two months' contributions together with this application form. 閣下首 2 個月之供款請以支票方式連同此申請表遞交。	
Bank Name 銀行名稱 : _____	
Cheque No. 支票號碼 : _____	
Cheque Amount 支票金額 : HK\$ 港幣 _____ 元	



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

SECTION 3 – LUMP SUM CONTRIBUTION
第三部份 整筆供款

Lump Sum Contribution Enclosed 附上整筆供款 HK\$港幣 _____元 (subject to a minimum of HK\$1,000 最低供款額為港幣 1,000 元)

Bank Name 銀行名稱 : _____

Cheque No. 支票號碼 : _____

Lump sum contribution payment must be made by a crossed cheque payable to “Principal MPF Scheme S800”. Any subsequent lump sum contribution can be made by submitting the “Change of Member Particulars for Special Voluntary Contributions” form together with the cheque payment.

請付上劃線支票支付整筆供款，支票抬頭請填寫「信安強積金計劃 800 系列」。閣下日後之整筆供款請以支票連同特別自願性供款成員資料更改表格一併遞交。

SECTION 4 – INVESTMENT OPTIONS
第四部份 投資選擇

Constituent Funds 基金種類	Percentage Allocation of Special Voluntary Contributions 特別自願性供款之百分比
Principal Capital Guaranteed Fund (CGF) 信安資本保證基金	
Principal Long Term Guaranteed Fund (LTGF) 信安長線保證基金	
Principal MPF Conservative Fund (MCF) 信安強積金保守基金	
Principal HK Dollar Savings Fund (HKDSF) 信安港元儲蓄基金	
Principal Hong Kong Bond Fund (HKBF) 信安香港債券基金	
Principal International Bond Fund (IBF) 信安國際債券基金	
Principal Stable Yield Fund (SYF) 信安平穩回報基金	
Principal Long Term Accumulation Fund (LTAF) 信安長線增值基金	
Principal Global Growth Fund (GGF) 信安環球增長基金	
Principal US Equity Fund (USEF) 信安美國股票基金	
Principal Asian Equity Fund (AEF) 信安亞洲股票基金	
Principal China Equity Fund (CEF) 信安中國股票基金	
Principal Hang Seng Index Tracking Fund (HSITF) 信安恒指基金	
Principal Hong Kong Equity Fund (HKEF) 信安香港股票基金	
Principal International Equity Fund (IEF) 信安國際股票基金	
Total percentage 百分比總和	100%

Remarks 備註:

- The aggregate amount of special voluntary contributions to be invested in Principal Long Term Guaranteed Fund (“LTGF”) during each financial year should not exceed HK\$300,000. The aggregate amount will include (i) the total amount of regular contribution and lump sum contribution; (ii) the total amount of funds switched from other constituent funds under the Scheme or transferred from other retirement schemes, and (iii) the total amount of funds transferred from other accounts in other capacities under the Scheme. Any amount in excess of HK\$300,000.00 will be automatically invested in the **Principal HK Dollar Savings Fund (or if Principal HK Dollar Savings Fund is terminated, Principal MPF Conservative Fund)**. 在每個財政年度內，投資於信安長線保證基金的特別自願性供款總數不可以多於港幣 300,000.00 元。總數包括 (i) 定期及整筆供款總數 (ii) 計劃帳戶中轉入之成份基金總數或由其他退休計劃轉入之基金總數及 (iii) 在計劃下由其他帳戶轉入之基金總數。超過港幣 300,000.00 元之特別自願性供款將會投資在指定基金內 — 即**信安港元儲蓄基金 (倘若信安港元儲蓄基金被取消，則以信安強積金保守基金替代)**。
- If the total investment allocation does not equal to 100%, the Trustee will invest all contributions in the default fund of the Scheme, **Principal HK Dollar Savings Fund (or if Principal HK Dollar Savings Fund is terminated, Principal MPF Conservative Fund)**. 如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**信安港元儲蓄基金 (倘若信安港元儲蓄基金被取消，則以信安強積金保守基金替代)**。
- All the contributions and transfer-in money for special voluntary contributions will be invested according to the above stated investment direction. 上述投資基金分配比例適用於特別自願性供款之所有供款及轉入之資金。
- Percentages indicated must be an integer and add up to 100%. 所示之比例必須為整數，而每欄總和必須為 100%。

SECTION 5 – DECLARATION
第五部份 聲明

1. I have 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 me are correct in all respects.
本人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本人提供的資料均為確實無誤。
2. I understand that Principal Trust Company (Asia) Limited (“the Trustee”) intends to use my 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. I also understand that the Trustee cannot make such use of my personal data without my consent and will cease to use my personal data for direct marketing purpose upon my written or verbal request. I hereby express my consent to the use of my name and all contact details (as provided/updated by me from time to time) by the Trustee (and its agents) for the aforesaid direct marketing purpose. I further understand that should I find such use of my personal data not acceptable, I should indicate my objection by ticking “✓” the box below.
- I object to the proposed use of my personal data in direct marketing.
- 本人明白信安信託(亞洲)有限公司(「受託人」)擬使用本人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。本人亦明白受託人在未得本人的同意之前不能如此使用本人的個人資料，受託人倘接獲本人之書面或口頭要求，將停止使用本人的個人資料作直接促銷用途。本人現在明確表示同意受託人（及其代理）使用本人的姓名及所有聯絡資料(由本人不時提供/更新)作上述直接促銷用途。本人進一步明白，如本人不接受本人的個人資料用作此用途，本人應在以下方格內加上「✓」號，以表示反對。
- 本人反對本人個人資料被使用於擬作出的直接促銷。
3. I wish to establish a special voluntary contributions account in the Principal MPF Scheme Series 800 (the “Scheme”) so as to hold the accrued benefits in respect of my Special Voluntary Contributions.
本人現欲參與信安強積金計劃 800 系列（“本計劃”）內之特別自願性供款，以持有本人之特別自願性供款的累算權益。
4. I understand that participation in the Scheme shall be governed by the trust deed of the Scheme as amended from time to time (the “Deed”) and this Application Form.
本人明白參與本計劃將受本計劃所不時修改的信託契據（“契據”）及計劃申請表格管限。
5. I hereby covenant with the Trustee to comply with and be bound by the provisions of the Deed and this Application Form and all applicable laws and regulations.
本人現與受託人立約承諾遵從並受制於契據及本計劃申請表的條款及適用的法律和規例。
6. Subject to the provisions of the Deed and this Application Form, I undertake and agree 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 Scheme either:
- (a) arising out of my breach of the warranty referred to in paragraph 1; or
(b) as a result of my failure or omission to duly and punctually perform or observe any obligations pursuant to the Deed and this Application Form or otherwise so far as they relate to the Special Voluntary Contributions.
- 本人除受制於契據及本計劃申請表格的限制條款外，亦同意承擔補償受託人任何及所有由於以下原因而引致與集成信託計劃成員參與本計劃的訴訟、索償或要求所帶來的訴訟費、費用、收費、責任及花費：
- (a) 本人違反條款 1 所承諾的保證；或
(b) 任何由於本人疏忽或遺忘依時履行或遵守契據及本計劃申請表格訂定的責任或其他與特別自願性供款相關的責任。
7. I undertake and agree to pay all fees and expenses which are payable by it under the terms of the Deed and this Application Form.
本人同意承擔支付所有按契據及本計劃申請表格條款而需支付的費用及花費。
8. This Application Form shall be governed by the laws of Hong Kong.
本計劃申請表格是受香港法律所管限。

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

Signed this _____ day of _____, _____
day month year
簽署日期 (日/月/年)

(FOR OFFICE USE ONLY 公司專用)

Signature of Licensed MPF Intermediary
強積金中介人簽署

Name in print
簽署人姓名

MPF Intermediaries Reg. No.
強積金中介人註冊號碼

Contact Tel. No.
聯絡電話

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 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。

僱主轉移權益須知

填寫第 MPF(S)-P(E) 號表格前，請先閱讀下列重要資料：

(1) 用詞定義：

- (a) 「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）的帳戶。
 - (b) 「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」）一指轉出僱員的累算權益的強積金計劃的受託人。
 - (c) 「新受託人」（在《規例》中亦稱「承轉受託人」）一指轉入僱員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(E) 號表格所述的新受託人將與原受託人相同。
 - (d) 「原計劃」一指轉出僱員的累算權益的強積金計劃。
 - (e) 「新計劃」一指轉入僱員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(E) 號表格所述的新計劃將與原計劃相同。
- (2) 第 MPF(S)-P(E) 號表格供擬把僱員的累算權益轉移至另一個強積金註冊計劃的僱主使用，或供擬把另一名僱主的僱員的累算權益轉移至新僱主所參與的計劃的新僱主使用。後者的情況或會在業務擁有權有所變更或僱員在有聯繫公司之間轉調時出現。在該情況下，新僱主應填寫第 MPF(S)-P(E) 號表格。
- (3) 如僱員成員現時投資於強積金保證基金，則根據第 MPF(S)-P(E) 號表格的要求從該保證基金轉出累算權益可能導致他們不符合部分或所有保證條件，從而影響他們享有保證的資格。有關詳情請查閱原計劃的要約文件或向原受託人查詢。
- (4) 請確保你已參加並安排你的僱員登記參加新計劃。否則你在向新受託人提交第 MPF(S)-P(E) 號表格之前，便須參加並安排你的僱員登記參加該計劃。

- (5) 請小心填寫第 MPF(S)-P(E)號表格，因為受託人未必能夠撤銷已採取的行政步驟。
- (6) 若你在第 MPF(S)-P(E)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。
- (7) 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。
- (8) 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。

~完~

[此乃空白頁。請填妥載於第 1 頁至第 3 頁的第 **MPF(S)-P(E)** 號表格，並提交該表格〔「填報須知」無須提交〕予新受託人。]

第 MPF(S) - P(E)號表格

僱主資金轉移申請表

《強制性公積金計劃（一般）規例》（簡稱《規例》）第 150 及 150A 條

- (a) *請刪去不適用者。請在不適用處填上「不適用」。
- (b) 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。
- (c) 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。

第 I 部 — 轉移類別

(1) 請說明轉移的原因，並於適當方格內填上✓號。

- 第 1 類：轉移至同一僱主的另一個強積金計劃
- 第 2 類：轉移至新僱主參與的另一／同一個強積金計劃（請就每名擬轉移權益的僱員填寫一份由受託人提供有關在業務擁有權變更／集團內轉調的情況下轉移累算權益的表格）

第 II 部 — 現任僱主資料（適用於第 1 類轉移）或新僱主資料（適用於第 2 類轉移）

(2) 僱主名稱 ^{註 1}： _____

(3) 通訊地址：

* 香港／九龍／新界／其他（請註明）			
地區			
街道		街道號碼	
大廈	座	樓層	室

(4) 聯絡人姓名： _____

(5) (a) 電話號碼： _____

(b) 手提電話號碼： _____

(6) 傳真號碼： _____

(7) 電郵地址： _____

第 III 部 — 資金轉移資料

(8) 轉出累算權益^{註 2}的計劃的資料原計劃的僱主名稱^{註 3}： _____

原受託人名稱： _____

原計劃名稱： _____

僱主識別號碼^{註 4}： _____向原計劃供款的最後日期：

日	月	年

(9) 你是否擬轉移所有參與原計劃的僱員的累算權益^{註 2}？（請於適當的方格內填上✓號） 是 否(10) 擬轉移累算權益^{註 2}的僱員的詳細資料：

編號	僱員姓名	僱員的香港身份證號碼 ^{註 5}
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

(僱主可另紙提供僱員的詳細資料，並請加上授權簽署及公司印章。)

(11) 轉入累算權益的計劃的資料

新受託人名稱： _____

新計劃名稱： _____

僱主識別號碼^{註 4}： _____

轉移開始生效日期：

日	月	年

第 IV 部—授權及聲明

(12) 本人／我們*聲明：

- (a) 本表格所提供的原計劃僱員及參與僱主的全部個人資料，乃為達致本表格內所述的目的而收集；或
- (b) 本表格內所述的目的直接與在收集該等個人資料時擬將其使用於的目的有關；或
- (c) 本人／我們*已獲得原計劃的僱員及參與僱主的同意，同意為達致本表格內的目的而使用他/她/他們於本表格內披露的個人資料。

(13) 此外，本人／我們*聲明：

- (a) 本人／我們*已閱讀《僱主轉移權益須知》的內容；
- (b) 本人／我們*，作為原計劃的參與僱主(只適用於第 1 類轉移)，特此作出通知本人／我們有意就第 III 部的僱員終止參與原計劃；及
- (c) 盡本人／我們*所知所信，本表格所提供的資料正確及詳盡。

[僱主簽署及公司印章（如適用）^{註 6}]

日期

填報須知

- (1) 如屬將僱員的累算權益轉移至新僱主參加的新計劃，這指新僱主。
- (2) 所指的累算權益僅限於現任僱主的僱員在原計劃的供款帳戶內的累算權益。
- (3) 如這個名稱與第II(2)部的僱主名稱相同，則無須填寫此項。
- (4) 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）。如不清楚識別號碼，請聯絡有關受託人。
- (5) 如僱員沒有香港身份證，請填上他們的護照號碼，並註明其為護照號碼。
- (6) (a) 如屬將僱員的累算權益轉移至新僱主的強積金計劃，則這份表格須由新僱主簽署。
(b) 假如僱主並不是自然人，本表格可由行政總監、行政總裁或任何獲授權人士代表僱主簽署。

~完~

Member List for Plan Transfer

Company Name: _____

Scheme Name: _____

Scheme No.: _____

We would like to transfer our MPF scheme from _____
to **Principal Trust Company (Asia) Limited** effective from
_____ for the following listed members:-

Item No.	Member Name	HKID No.
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Item No.	Member Name	HKID No.
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Authorized Signature with Company Chop
(Tel: _____)

To: _____

Date: _____

Dear Sir,

Re: **Notice of MPF Scheme Termination – Plan Transfer**

Company Name: _____

Scheme Name: _____

Scheme No.: _____

We would like to transfer our MPF scheme to **Principal Trust Company (Asia) Limited** effective from _____, please take this as a written notification from us to terminate the participation in your trust on the same date. Our last contribution to your company will be made up to _____.

Your kind cooperation is appreciated.

Regards,

Authorized Signature with Company Chop
(Tel: _____)

c.c. _____, Principal Insurance Company (Hong Kong) Limited

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 <input type="checkbox"/> Mr 先生 <input type="checkbox"/> Mrs 太太 <input type="checkbox"/> Miss 小姐 <input type="checkbox"/> Ms 女士 <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 <input type="checkbox"/> Primary or below 小學或以下學歷 <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。

<u>X</u>		<u>X</u>	
Signature of customer	Date	Signature of sales staff	Date
客戶簽署	日期	銷售員工簽署	日期