

致: 中銀國際英國保誠信託有限公司
香港太古城英皇道 1111 號
15 樓 1507 室

To: BOCI-Prudential Trustee Limited
Suite 1507, 15/F, 1111 King's Road,
Taikoo Shing, Hong Kong

FORM ER-CHG(P/C)

中銀保誠簡易強積金計劃
BOC-PRUDENTIAL EASY-CHOICE MANDATORY PROVIDENT FUND SCHEME

注意 Note:

- 請以英文正楷填寫。Please complete in BLOCK LETTERS.
- *請刪除不適用者。* Please delete whichever is inappropriate.
- 請於適當位置加上✓號。Please ✓ the appropriate box.
- 如實體的稅務居民身分及/或控權人的自動交換財務帳戶資料紀錄有所改變，必須在改變後的 30 天內通知受託人有關的改變並提供最新的自我證明表格。An entity account holder should notify our Company and provide an updated Self-Certification form within 30 days if there is any change in circumstances relating to its tax residency(ies) status and/or Automatic Exchange of Financial Account Information about controlling person(s).

Sample 樣本

甲部 僱主資料及生效日期 Part A EMPLOYER DETAILS & EFFECTIVE DATE OF CHANGE

僱主名稱 Name of Employer	ABC Company Limited		
參與計劃編號 Participating Scheme No.	00123456789	生效日期 Effective Date of Changes	01 12 2022 日 DD 月 MM 年 YYYY

乙部 更改僱主賬戶資料 Part B CHANGE OF EMPLOYER ACCOUNT DETAILS

<input checked="" type="checkbox"/> 更改通訊地址 Change of Correspondence Address	室 Flat/Room 001	樓 Floor 1	座 Block 1	大廈/屋部名稱 Name of Building/Estate Happy Building
	門牌號碼 Street No. 1	街道名稱 Name of Street Happy Street		
	地區 District Central	<input checked="" type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT	只適用於香港以外地址 Applicable to address outside HK only 城市 City 國家/地區 Country/ Region	
<input type="checkbox"/> 更改註冊地址 Change of Registered Address (請提供有效的商業登記證及/或公司註冊證書及/或其他有關的登記證之副本。Please provide a copy of valid Business Registration Certificate and/or Certificate of Incorporation and/or other relevant registration documents)	室 Flat/Room	樓 Floor	座 Block	大廈/屋部名稱 Name of Building/Estate
	門牌號碼 Street No.	街道名稱 Name of Street		地區 District
	<input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT	只適用於香港以外地址 Applicable to address outside HK only 城市 City		註冊地點 Place of Incorporation 國家/地區 Country/ Region
<input type="checkbox"/> 更改現時營業地址 Change of Current Business Address (請提供有效的商業登記證及/或公司註冊證書及/或其他有關的登記證之副本。Please provide a copy of valid Business Registration Certificate and/or Certificate of Incorporation and/or other relevant registration documents)	室 Flat/Room	樓 Floor	座 Block	大廈/屋部名稱 Name of Building/Estate
	門牌號碼 Street No.	街道名稱 Name of Street		地區 District
	<input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT	只適用於香港以外地址 Applicable to address outside HK only 城市 City		國家/地區 Country/ Region
<input type="checkbox"/> 更改*業務名稱/公司法定名稱 Change of * Business Name / Company Legal Name	• 新*業務名稱 / 公司法定名稱: New * Business Name / Company Legal Name: _____			
	• 登記號碼 Registration No.: _____			
	• 請附上商業登記證, 及如適用, 公司更改名稱註冊證書(適用於有限公司)之副本。 Please also submit a copy of the Business Registration Certificate, and if applicable, the Certificate of Incorporation on Change of Name (for limited company).			

請填寫需要更改之項目

更改僱主聯絡詳情 Change of Employer Contact Details

新聯絡人名稱:
Name of New Contact Person: **Chan Tai Man**

新聯絡人職銜:
Title of New Contact Person: **HR Manager**

新電郵地址:
New Email Address: **chantaiman@abccompany.com.hk**

新傳真號碼:
New Fax No.: _____

新辦公室電話號碼: New Business Phone No.: **2345-678**

新本地流動電話號碼 New Local Mobile No.: **(852) 9123-4567**

Version as at Nov 2022

Sample 樣本

丙部 更改供款方法/方式 Part C CHANGE OF CONTRIBUTION METHOD / FRE

更改供款方式 Change of Contribution Frequency

僱員組別 Employee Group: 所有僱員 All
就指定僱員，請註明 In respect of specified employees, please specify
供款方式 Contribution Frequency: 每月 Monthly 每半個月 Semi-Monthly
其他，請註明 Others, please specify

薪金週期: 由每月 日至*該月/下一個月 日
Payroll Covering Period: From day of the month to day of the * that / following month

更改付款方法 Change of Payment Method

自動轉賬 Autopay (請填妥“直接付款授權書” Please complete “Direct Debit Authorization Form”)

支票 Cheque

丁部 個人資料收集聲明 Part D PERSONAL DATA COLLECTION STATEMENT

中銀保誠簡易強積金計劃(「本計劃」)之參與僱主提供的個人資料及該等人士的交易詳情可用作處理本計劃的申請、處理及管理本計劃下的供款、累算權益、申索和轉移的用途，及/或用作進行直接促銷、改善或進一步提供本公司有關強積金產品及/或服務的用途。

Personal data provided by participating employers of BOC-Prudential Easy-Choice Mandatory Provident Fund Scheme (the “Scheme”) and details of transactions or dealings by such participating employers may be used for the purposes of processing the application, administering and managing contributions, accrued benefits, claims and transfers under the Scheme, and/or for the purpose of conducting direct marketing of, improving, or furthering the provision of MPF related products and/or services of the company.

若客戶不欲其個人資料用作直接促銷用途，請在方格內填上剔號

如閣下不欲個人資料用作上述直接促銷用途，請在方格內填上剔號(此指示適用於閣下於本公司強積金計劃開立之所有賬戶(包括本公司其他強積金計劃、職業退休計劃及/或所有將來開立之賬戶))。

Please tick if you do not wish your personal data to be used for the above direct marketing purpose (this instruction applies to all your accounts set up under our MPF/ORSO schemes (including all our other MPF/ORSO schemes and/or any further accounts set up in the future))

戊部 聲明及簽署 Part E DECLARATION AND SIGNATURE

- (1) 我們以簽署此通知書作為聲明此通知書內所提供之資料為真實及正確。
(2) 我們確認已閱讀、明白及同意丁部內的個人資料收集聲明。
(3) 我們知悉及同意，受託人可把收集所得的資料交給稅務局以將資料交到另一申報稅務司法管轄區的主管部門，以作自動交換財務帳戶資料用途以遵守稅務法律及規例(包括但不限於《稅務條例》(第112章)和根據自動交換資料有關的經濟合作與發展組織(OECD)《通用報告準則》(CRS)的規則)。
(4) 我們承諾，如實體的稅務居民身分及/或控權人的自動交換財務帳戶資料紀錄有所改變，必須在改變後的30天內通知受託人有關的改變並提供最新的自我證明表格。
(1) We declare that all information given in this Notice is true and correct by signing of this Notice.
(2) We confirm that we have read, understood and agreed to the Personal Data Collection Statement in Part D.
(3) We acknowledge and agree that the data collected may be transmitted by the Trustee to the Inland Revenue Department for which may further exchange such information to the competent authority of another reportable jurisdiction for the purpose of Automatic Exchange of Financial Account Information (“AEOI”) in compliance with tax law and regulations (including but not limited to the Inland Revenue Ordinance (Cap.112) and regulations based on the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard (CRS) for automatic exchange of information).
(4) We undertake to notify the Trustee and provide an updated Self-Certification form within 30 days if there is any change in circumstances relating to the tax residency(ies) status of the Entity and/or Automatic Exchange of Financial Account Information about controlling person(s).

公司印章(長印) + 負責人簽署

21/11/2022

授權簽署及公司印章 Authorized Signature(s) with Company Chop

日期 Date (日 DD/月 MM/年 YYYY)

Version as at Nov 2022

專用 For Official Use Only

此授權簽署人必須為 公司董事/ 獨資經營者/合夥人/ (非法人團體) 最終擁有人或管理人

Date of Input:

Date of Verification: