

**My Choice Mandatory Provident Fund Scheme**

**MPF Administration Guide**  
**For Employers**



**BOCI-Prudential Trustee Limited**

*Eighteenth Edition*

## **INTRODUCTION**

BOCI-Prudential Trustee Limited ("*BOCPT*") is pleased to offer the eighteenth edition of the *MPF Administration Guide For Employers*.

*BOCPT* hopes that this Guide will serve as a useful reference material to assist all participating employers to operate their MPF schemes more easily and smoothly. You are welcome to make comments, suggestions and requests for further information via our Customer Service Hotline at 2929-3366.

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## **SECTION 1 MPF Issues for Employer**

### **1.1 Understanding Employer's Responsibilities**

As an employer, you are responsible for the following:-

#### **Enrolment:-**

- ◆ Enrol your employees who have been employed for 60 days or those casual employees who have been employed for 10 days to become members of registered MPF schemes.

#### **Contributions:-**

- ◆ Calculate MPF relevant income and make full contribution for each contribution period on time (including making first-time contribution for the above-mentioned new employees).
- ◆ Submit a remittance statement to the trustee showing the relevant income and contribution amount of each relevant employee for each contribution period.
- ◆ Assist employees in making voluntary contribution.

#### **Administration:-**

- ◆ Notify the trustee of termination of an employee's employment contract.
- ◆ Provide a pay-record showing relevant income, amount of contributions and date of making contribution payment to employees within 7 working days after making payment of contribution
- ◆ Notify the trustee of any changes in business names, address, telephone number, fax number and/or voluntary contribution within 30 days from the effective date of change.
- ◆ An entity account holder should notify the Trustee 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).

## **SECTION 2 Day-to-Day MPF Administration**

### **2.1 Employer Enrolment**

#### **(a) Registration with Mandatory Provident Fund Schemes Authority (“MPFA”)**

*BOCPT* will file your registration on your behalf to the MPFA upon completion of the enrolment.

#### **(b) Transfer accrued benefits from other service provider**

When you as a participating employer have decided to transfer your MPF Scheme to *BOCPT* and have enrolled all your employees into the participating scheme, *BOCPT* will forward the form “Participating Employer’s Request for Fund Transfer Form” 《Form MPF (S)-P(E)》 together with a list showing all enrolled employee members to your original trustee. Upon receipt of their accrued benefits from your original trustee, *BOCPT* will issue a statement showing the transferred payment to each relevant employee.

#### **(c) Welcome Kit**

A welcome kit is intended to provide you as an effective and comprehensive tool to handle your MPF daily administration which includes the following :-

- ◆ Notice of Participation
- ◆ Copy of Employer Application Form incorporated with signed Participation Agreement
- ◆ MPF Admin Guide (List of QR codes including:)
  - MPF Administration Guide for Employers
  - MPF Scheme Brochure
  - MPF Administration Forms
  - Notice on MPF Contributions
  - BOCI-Prudential Internet and Interactive Voice Response System User Guide
  - Member Handbook
- ◆ Copy of Customer Declaration Form (if applicable)
- ◆ Copy of Customer Referral Form (if applicable)

## **2.2 Employee Enrolment**

It is the employer's obligation to take "all practicable steps" to enrol all the eligible employees. With certain exemption, an employee aged between 18 and 65 and who has been employed for 60 days or more under an employment contract should be enrolled into a MPF scheme (*within 10 days of commencing employment for those casual employees*).

**(An employee aged 65 or above may also be enrolled into an MPF scheme and make voluntary contributions.)**

BOCPT recommends you to take the following steps:-

- (a) Complete the name of employer and scheme number as specified in Part (I) of the "Member Enrolment Form" 《MY EE FORM-MC-VC》.
- (b) Complete the employment details as specified in Part (VI) of Member Enrolment Form and forward the form to the relevant employees for their further completion. You should specify the "Date joined Voluntary Contribution plan" and "Vesting Date of Employer's Voluntary Contribution" in "Notice of Addition/Change of Member's Voluntary Contribution" 《MY ER CHG VC》 if you intend to make voluntary contributions to the employees.
- (c) Remind the employees to complete and return the enrolment form at least one month prior to making of the first contribution.
- (d) Starting from 1 January 2020, the Automatic Exchange of Financial Account Information in Tax Matters ("AEOI") will take effect under the Inland Revenue Ordinance (Cap. 112) ("the Ordinance"). Under the Ordinance, MPF schemes and ORSO registered schemes are required to comply with the due diligence and reporting obligations relating to the AEOI. Hence, a complete self-certification will be required from account holder for all new MPF and ORSO accounts opened on or after 1 January 2020 to verify scheme member's tax residency. Otherwise, the relevant account opening process could not be completed.
- (e) If the investment instruction section of member enrolment form is left blank or uncertain, the investment instruction will be deemed invalid. Under this circumstance, all such employee's relevant contributions will be invested in accordance with **Default Investment Strategy** until BOCPT has received a new investment instruction from the employee.

BOCPT will issue a "Notice of Participation" to employee directly within 1 week after the employee becomes a member of the Scheme. Employer will receive "Notice of Temporary Enrolment" and member handbook(s) if "Member Enrolment Form" of employee(s) is/are outstanding, employer should forward them to the relevant member(s) within 7 working days upon receipt. Also, please be reminded to return the completed "Member Enrolment Form" for relevant member(s).

### **Notes for Completion of "Member Enrolment Form":-**

The "Member Enrolment Form" comprises seven sections:-

- Part I: Complete the Personal Details of Scheme Member.
- Part II: Complete the Tax Residency Self-Certification of Scheme Member (Must Fill).
- Part III: Complete the Investment Details
- Part IV: Read the BOCPT Personal Data Collection Statement.
- Part V: Sign the declaration and date the form by the employee after checking, and indicate if member does not wish his/her personal data to be used for direct marketing or transfer his/her MPF information to banks' ATM .for enquiry services.
- Part VI: Complete and sign the Employment Details of the employee by the authorised person(s) of your company with company chop.
- Part VII Read the Appendix.

Sample of "Member Enrolment Form"



Sample

成員申請表  
MEMBER ENROLMENT FORM  
MY EE Form-MC-VC

注意 Note:  
1. 請以正楷填寫。Please complete in BLOCK LETTERS.  
2. 若未有適當簽署本表格及註明日期，本表格將被視為無效，受託人並無責任執行本表格上填寫的指示。The form would be deemed invalid if it is not duly signed and dated, and the trustee shall be under no obligation to process the instruction.  
3. 請於任何修改處旁增加簽名。Please initial next to any alterations made on the form.

(I) 計劃成員資料 PERSONAL DETAILS OF SCHEME MEMBER

1. 僱主名稱 Employer Name ABC Company Limited

2. 計劃編號 Scheme No. 3 | 0 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |

3. 僱員編號 (如有) Staff ID (if any) S1234

4. 成員姓名 Member Full Name  先生 Mr  女士 Ms 中文 Chinese 陳大文  
(必須與香港身份證/護照相同 as shown on HKID/Passport) 英文姓氏 English Surname Chan  
英文名字 English Given Name Tai Man

5. 出生日期\* Date of Birth\* 01 日 DD 01 月 MM 1980 年 YYYY  
\* 如成員只提供出生年份及月份，受託人將以出生月份的最後一天作為成員的出生日期；如成員只提供出生年份，受託人將以出生年份的最後一天作為成員的出生日期。若成員於此欄留空或資料不正確，並在第(III)部中選取預設投資策略或投資指示無效，則其有關供款將會投資於我的 65 歲後基金，及不會進行降低投資風險安排。If member only provides the year and month of birth, the trustee will use the last day of the month as the birthday of the member, and where if the member only provides the year of birth, the trustee will use the last day of the year as the birthday of the scheme member. If the field is left blank or uncertain, and member selected DIS or his/her investment instruction is invalid under Part (III), member's relevant contributions will be invested in the My Choice Age 65 Plus Fund without applying de-risking.

6. 身份證明文件號碼 Identity Number  香港身份證號碼 HKID No. A123456(7) 或或  \* 護照號碼 \* Passport No. \_\_\_\_\_  
\* 護照號碼僅供沒有香港身份證的成員填寫。\* Passport No. ONLY applicable to member without HKID.

7. 國籍 (國家/地區) Nationality (Country/Region) Hong Kong  
以下所有聯絡資料，將自動適用於申請人以同一香港身份證/護照號碼登記於我的強積金計劃 (本計劃) 的所有賬戶。  
All the below contact information will automatically apply to ALL your accounts maintained under the same HKID/Passport number registered under My Choice Mandatory Provident Fund Scheme (the "Scheme").

8. 現時住宅地址 Current Residential Address (即不接受郵政信箱 P.O. Box will not be accepted)  
A 10 A Good Building  
室 Flat/Room 樓 Floor 座 Block 大廈/屋邨名稱 Name of Building/Estate  
100 Good Road  
門牌號碼 Street No. 街道名稱 Name of Street  
Wanchai  香港 HK  九龍 KLN  新界 NT  
地區 District  
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 \_\_\_\_\_

所有通訊文件將會寄往以上地址。如欲提供另一通訊地址，請於收到參與通知函後填寫成員資料更改表。  
All correspondence will be sent to the above address. If you wish to use a different address for correspondence, please complete the Notice of Change of Scheme Member's Particulars after you receive the Notice of Participation from us.

9. 電話號碼 Phone No.  
請提供至少一個本地手提電話號碼及電郵地址，以便日後收取本公司電子服務驗證碼及方便聯絡閣下。Please provide at least one local mobile phone no. and email address to receive the verification code for using our electronic services and remain in contact with us.  
本地流動電話號碼 Local Mobile Phone No. (852) 98765432 住宅電話號 Residential Phone No. (852) 23456789  
香港以外電話號碼 (國家編號 Country Code) - (地區編號 Area Code) - ( )

10. 電郵地址 Email Address chantaiman@hotmail.com

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  
電郵 Email: mpf@bcpt.com

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



**(I) 申請人資料 (續) APPLICANT DETAILS (CONT'D)**

**11. 「e-成員」登記 (只適用於本賬戶) Registration for "e-Member" (applicable to this account only)**

如選擇日後以電子方式收取有關強積金電子結單及年度成員權益報表等，請在方格內填上附號，並提供有效的電郵地址及流動電話號碼。本賬戶將自動成為「e-成員」。如閣下於其他賬戶已登記為「e-成員」，而此處並未作出選擇，將不受影響。有關「e-成員」服務的詳細條款，請參閱(VII)節的「e-成員」事先同意書。Please tick and provide a valid e-mail address with mobile phone no. If you want to receive relevant MPF e-statements and Annual Benefits Statement etc. by electronic means in the future. If you select to register as e-Member, this account will become e-Member automatically. In case that you are already an e-Member for other accounts under the Scheme, such status will not be affected even if you do not opt for e-Member in this form. For the Terms and Conditions of "e-Member" services, please read the Prior Consent for "e-Member" Services of Part (VII).

e-通知方法 (如沒有選擇或選擇多於一項，我們將以手機短訊作為預設的 e-通知方法)  
e-Alert Method (We will default SMS as your e-Alert Method if you do not make any selection or make more than one selection here).

手機短訊 SMS  電郵 Email



登入賬戶  
Account Login

**12. 披露資料予強積金中介人同意書 Consent of Disclosure of Particulars to MPF Intermediary**

如閣下同意受託人披露及轉移下列指定個人資訊及戶口資訊 (統稱「資訊」)，予閣下僱主指定強積金中介人 (僱主強積金中介人) 以協助管理強積金戶口，請在方格內填上附號。Please tick the box if you authorize the Trustee to disclose and transfer your personal information together with your account information as specified below (collectively, the "information") to the MPF intermediary engaged by your employer ("ER MPFI") in order to provide MPF related assistance to you.

閣下現有受僱合約終止時，閣下將在下列情況授權僱主強積金中介人代理管理閣下個人賬戶 Upon cessation of your current employment, you authorize the ER MPFI to act on your behalf, to handle your personal account ("PA") under the following circumstances:

- 因應法規在本計劃下的資金轉移而建立之個人賬戶，the PA that is automatically created as required by law for the transfer of your accrued benefits under the Scheme.

閣下理解及同意受託人會不時獲授權通知、指定其他強積金中介人為閣下提供強積金相關協助。You understand and agree that, from time to time, the Trustee is authorized to notify you with the assignment of another MPF intermediary to provide MPF related assistance to you.

閣下聲明此授權將與本表格同時生效，並保持其效力除會及直至閣下遞交「撤銷同意披露資料予強積金中介人資料通知書 - 僱員成員」以撤銷其效力；及受託人獲悉及收到其「撤銷同意披露資料予強積金中介人資料通知書 - 僱員成員」。You declare that the authorization shall take effect on the date of this form and remain in force unless and until it is revoked by you by submitting the "Revocation Notice for Consent of Disclosure of Particulars to MPF Intermediary - Employee Member"; and the Trustee has been notified of and has received the "Revocation Notice for Consent of Disclosure of Particulars to MPF Intermediary - Employee Member".

閣下授權披露及轉移的資訊將包括但不限於: information that you wish to be disclosed and transferred shall include but not limited to:

個人資訊: 電話號碼、電郵地址及傳真號碼 Telephone number, email address and fax number

Personal Information:

戶口資訊: 計劃生效日期、合約狀況、合約編號、累積權益、總戶口結餘、基金戶口結餘、基金交易詳情、計劃轉移詳情及金額、投資分佈、投資回報、供款記錄及任何關於賬戶的操作和未解決的賬戶問題 Scheme effective date, contract status, contract number, accrued benefits, total account balance, account balance by fund, details of fund transaction, transfer-in details and amount, investment allocation, investment return, contribution history and any operations and outstanding issues of the accounts

Account Information:

**(II) 稅務居民身份自我證明(必須填寫) TAX RESIDENCY SELF-CERTIFICATION (MUST FILL)**

注意 Note:-

1. 這是您向中銀國際英國保誠信託有限公司 (「受託人」) 提供的自我證明，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)。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中銀稅務司法管轄區的主管部門。This is a self-certification provided by you to BOC-Prudential Trustee Limited (the "Trustee") (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). The data collected may be transmitted by the Trustee to the inland Revenue Department which may further exchange such information to the competent authority of another reportable jurisdiction.

2. 除非您的稅務居住地相關的情況有所改變，否則此自我證明將被視為仍然有效。您必須在改變後的 30 天內通知受託人有關的改變並提供最新的自我證明。This self-certification will remain valid unless there is any change in circumstances relating to your status of tax residency(ies). You must notify the Trustee within 30 days if there is any change in circumstances that makes any of the information provided in any parts of this self-certification form incorrect or incomplete and provide an updated self-certification form.

3. 受託人在開立成員賬戶前，**必須**取得完整及有效的稅務居民身份自我證明。為避免成員賬戶開立及供款處理(如有)有任何延誤，請繼續並完成以下所有適用部分。The Trustee **MUST** obtain the complete and valid tax residency self-certification for the setting up of member record. To avoid any delay in the setting up of member record and contribution settlement (if any), please read and complete all the appropriate parts below.

4. 受託人有權要求您提供所有相關的身份證明/驗證文件。如**未能**提供所需資料及其他個人資料，可能導致您的申請/指示不獲處理。All relevant identification/verification documentation will be provided to the Trustee upon request. 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.

5. 作為財務機構，受託人不獲允許提供稅務或法律意見。若您對您的稅務居民身份存有任何疑問，請向專業稅務顧問或瀏覽 OECD (<https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/>) 及稅務局 ([https://www.lrd.gov.hk/eng/tax/dta\\_aeoi.htm](https://www.lrd.gov.hk/eng/tax/dta_aeoi.htm)) 有關自動交換財務帳戶資料的網頁，或掃描此二維碼，以獲取更多 CRS 及相關資料。As a financial institution, the Trustee is not allowed to give tax or legal advice. If you have any questions regarding your tax residency, please consult your tax adviser or visit the OECD and Inland Revenue Department's AEOI website at <https://www.oecd.org/tax/automatic-exchange/crs-implementationand-assistance/> and [https://www.lrd.gov.hk/eng/tax/dta\\_aeoi.htm](https://www.lrd.gov.hk/eng/tax/dta_aeoi.htm) respectively, or simply scan the QR code, for more CRS and related information.



(OECD)



(稅務局 IRD)

6. 於前節提供的個人資料，包括姓名、身份證明文件號碼、出生日期及住址，將成為此自我證明的一部分。The personal information, including name, identity document number, date of birth and residential address, provided in Part (i) will form part of this self-certification.

Version as at May 2022 (BY E-Form-MDC)



**(前) 稅務居民身份自我證明 (必須填寫) (續) TAX RESIDENCY SELF-CERTIFICATION (MUST FILL) (CONT'D)**

閱讀上述注意事項後填寫下列部分 Complete following section after reading the Note above.

**重要提示！**如申請人在本表格中提供的稅務居民身份資料與本計劃下其已開戶的紀錄不同，本公司將以本表格的資料為準，並以此資料作為申請人於本計劃下所有賬戶的書面記錄。Important Notes: if the tax residency self-certification information furnished in this form is different from the pre-existing record(s) kept under the "Scheme", we shall deem such information in this form as the most updated particulars and will supersede previous record(s) under the Scheme.

ii) 以本人所知及所信，在此聲明 (如適用，請在下面的方格上填上「✓」)：  
I hereby declare that, to the best of my knowledge and belief (Please put a "✓" in the following box as appropriate):

本人之稅務居住地為 My Tax Residence is

- 只有香港，及沒有處於任何其他司法管轄區的稅務居住地 (稅務編號：本人提供的香港身份證號碼) Hong Kong **ONLY**, with no tax residence in any other jurisdictions (Tax Identification Number: my HKID Card No. provided)
- ☛ 您可略過本部分第(i)項 - You may skip Part (i) of this Section.

必須選擇其一

如果上面的方格不適用，請填寫本部分第(ii)項。請部分為稅務居住地是(甲)香港及其他司法管轄區或(乙)不是香港而是其他司法管轄區的稅務居民必須填寫的部分。If the box above does not apply, please proceed to Part (ii) of this Section which must be filled in for tax residence of either (a) Hong Kong and also some other jurisdictions or (b) not Hong Kong, but instead some other jurisdictions.

- 是香港 (稅務編號：本人提供的香港身份證號碼) 及其他司法管轄區 (請於本部分第(ii)項列出所有香港以外其他司法管轄區的稅務編號) - Hong Kong (Tax Identification Number: my HKID Card No. provided) **AND** also some other jurisdictions (Please fill out the TIN for all other jurisdictions, other than HK, in the table of Part (ii) of this Section).
- 不是香港而是其他司法管轄區的稅務居民 (請填寫本部分第(ii)項之列表) - **NOT** Hong Kong, but instead some other jurisdictions (Please fill out the table of Part (ii) of this Section).

00) 請在以下列明您作為稅務居民的所有司法管轄區 (香港除外) 及相關的稅務編號或具有同等功能的職稱編號(稅務編號)。如下列位置不敷應用，請按以下格式另加新頁。Please list all jurisdictions (other than Hong Kong) where you are a resident for tax purposes and Taxpayer Identification Number or its Functional Equivalent (TIN) for each jurisdiction. If the space provided is insufficient, please provide it in the below format on additional sheet(s).

稅務居民所在司法管轄區 Jurisdiction of Tax Residency	稅務編號 <sup>註1</sup> TIN <sup>Remarks 2</sup>	若未能提供稅務編號，請於下方填上理由 A、B 或 C <sup>註1</sup> If no TIN available, please indicate Reason A, B or C below <sup>Remarks 2</sup>	若您選擇理由 B，請在下方解釋無法取得稅務編號的原因。Please explain why you are unable to obtain a TIN if you have selected Reason B
(1)			
(2)			
(3)			

註 Remarks :

1. 您可在以下 OECD 網頁 (<https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/>) 了解相關稅務居民、司法管轄區發行的稅務編號。For more guidance on a TIN, please visit the below OECD website at <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/>. 您可以在以下網頁了解內地、香港及澳門的稅務編號格式。In particular, you can visit the below webpage for the details of the TINs for Mainland, Hong Kong and Macau:  
內地 Mainland: <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/China-TIN.pdf>  
香港 Hong Kong: <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/Hong-Kong-TIN.pdf>  
澳門 Macau: <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/Macao-TIN.pdf>
2. 理由 A - 帳戶持有人所屬的稅務居民的司法管轄區沒有向其居民發出稅務編號。  
Reason A: The jurisdiction where the account holder is a resident for tax purposes does not issue TINs to its residents.  
理由 B - 帳戶持有人無法獲得稅務編號。(若您選擇這理由，請在上表解釋您無法獲得稅務編號的原因。)  
Reason B: The account holder is unable to obtain a TIN. (Please explain why you are unable to obtain TIN in the above table if you have selected this reason.)  
理由 C - 無需稅務編號。(註：只有在相關司法管轄區的主管當局不要求披露該司法管轄區發出的稅務編號方可選擇這理由。)  
Reason C: No TIN is required. (Note: Only select this reason if the authorities of the relevant jurisdiction of residence does not require the TIN to be disclosed.)
3. 如欲了解自我證明表格內採用的名詞及措辭釋義，請瀏覽本公司網頁 <https://www.bocpt.com/homepage/zh-hk/faq/>  
For more information of the terms and expressions used in Self-Certification Forms, please visit our website at <https://www.bocpt.com/homepage/en/faq/>



**警告：**根據《稅務條例》第 80(2E)條，如任何人在作出自我證明時 (包括此處所述構成自我證明的一部分的內容)，在明知一項陳述在要項上屬具誤導性、虛假或不正確，或罔顧一 項陳述是否在要項上屬具誤導性、虛假或不正確下，作出該項陳述，即屬犯罪。一經定罪，可處第 3 級 (即 HK\$10,000) 罰款。  
**WARNING:** It is an offence under section 80(2E) of the Inland Revenue Ordinance if any person, in making a self-certification (comprising the contents herein described as forming parts of the self-certification), makes a statement that is misleading, false or incorrect in a material particular AND knows, or is reckless as to whether, the statement is misleading, false or incorrect in a material particular. A person who commits the offence is liable on conviction to a fine at level 3 (i.e. HK\$10,000).

**(III) 投資指示 INVESTMENT INSTRUCTION**

請指示有關供款的投資分佈。就每類型供款之投資指示，每項已選擇的投資選項分佈必須為整數及不少於 5%，而所有已選擇的投資選項總和必須為 100%，否則閣下的投資指示將被視為無效。閣下不一定需填寫此部分，但如留空此部分，或如閣下的投資指示被視為無效，閣下有供款將會根據預設投資策略作出投資。預設投資策略是一項現成及設有收費上限的強積金投資方案，並設有按年齡自動降低投資風險的特點。成分基金以及預設投資策略詳情請參閱有關請售文件，該等文件可向強積金中介人或客戶服務中心索取，亦可於本公司網站 [www.bocpt.com](http://www.bocpt.com) 下載。成員必須注意投資市場可能出現顯著的波動，基金單位價格可跌可升。在作出投資選擇前，閣下必須小心衡量個人可承受風險的程度及財政狀況(包括閣下的退休計劃)。如有任何疑問，請諮詢閣下的獨立財務顧問了解更多詳情。請注意，當閣下有一項或多項特定的指示(包括但不限於贖回或轉換指示)與每年的降低投資風險同一日處理時，每年的降低投資風險將會待完成所有特定指示後才執行(如需要)。Please indicate your investment choice. Investment instruction for each type of contributions must be an integer with a minimum of 5% per selected investment choice, and the total percentage must be equal to 100%; otherwise your investment instruction will be deemed invalid. This section is optional for you to fill in, but if this section is left blank or if your investment instruction is deemed invalid, your relevant contributions will be invested in accordance with **Default Investment Strategy ("DIS")**. DIS is a ready-made MPF investment strategy with fee caps, and also contains an automatic de-risking feature. Details of the constituent funds and DIS please refer to the offering documents which are available upon request from MPF intermediaries or at the Customer Service Centre. It can also be downloaded from website at [www.bocpt.com](http://www.bocpt.com). Members should note that investment markets could fluctuate significantly. Fund prices may go down as well as up. Please carefully consider your own risk tolerance level and financial circumstances (as well as your own retirement plan) before making any investment choices. If in doubt, please contact your independent financial advisor for further details. Please note that when one or more of the specified instructions (including but not limited to redemption or switching instructions) are being processed on the annual date of de-risking for you, the annual de-risking will only take place after completion of these instructions where necessary.

- 此部分的投資指示只適用於閣下的新供款及/或由其他計劃轉入的資產。這將不適用於閣下於同一我的強積金計劃內的轉移資產(即以基金單位方式轉移)。該筆資產的投資分佈(即各投資選項)將維持不變，直至閣下另行作出特定投資指示為止。The investment instructions of this part only apply to your future contributions and/or transfer-in assets from other schemes. It will not apply to your assets transferred within the same My Choice MPF scheme (i.e. by way of unit transfer), the investment allocation (i.e. respective investment choice) of such asset will remain unchanged until a valid specific investment instruction is received from you.
- 閣下可隨時透過以下途徑作出有效的特定投資指示。You may make your valid specific investment instruction through the following channels at any time:
  - (i) 互聯網 Internet
  - (ii) 互動語音系統 Interactive Voice Response System
  - (iii) 流動應用程式 Mobile apps
  - (iv) 表格 Form

注意：如需於本部分作任何修改，請於塗改處簽名作實。 Note: Please countersign if any amendment is made in this part.

有關我的強積金計劃各成分基金的詳情，請掃描右邊二維碼參閱本計劃的強積金計劃說明書及最新一期的季度基金便覽。 For the details of each constituent fund under My Choice Mandatory Provident Fund Scheme, please scan the QR codes on right side to read the MPF Scheme Brochure of the Scheme and the latest quarterly fund fact sheet.

互聯網頁 website: [www.bocpt.com](http://www.bocpt.com)



投資選項 Investment Choice			強制性供款 Mandatory Contribution	標準自願性供款 Standard Voluntary Contribution
預設投資策略	Default Investment Strategy	MyDIS	100 %	%
我的增長基金	My Choice Growth Fund	MyGF	%	%
我的均衡基金	My Choice Balanced Fund	MyBF	%	%
我的平穩基金	My Choice Stable Fund	MySF	%	%
我的環球股票基金	My Choice Global Equity Fund	MyGE	%	%
我的亞洲股票基金	My Choice Asia Equity Fund	MyAE	%	%
我的中國股票基金	My Choice China Equity Fund	MyCE	%	%
我的香港股票基金	My Choice Hong Kong Equity Fund	MyHKE	%	%
我的香港追蹤指數基金	My Choice Hong Kong Tracking Fund	MyTF	%	%
我的環球債券基金	My Choice Global Bond Fund	MyGB	%	%
我的港元債券基金	My Choice HKD Bond Fund	MyHB	%	%
我的人民幣及港元貨幣市場基金	My Choice RMB & HKD Money Market Fund	MyRMM	%	%
我的強積金保守基金	My Choice MPF Conservative Fund	MyCPE	%	%
我的核心累積基金	My Choice Core Accumulation Fund	MyCAF	%	%
我的 65 歲後基金	My Choice Age 65 Plus Fund	MA65F	%	%
注意：降低投資風險機制將不適用於獨立選擇的「我的核心累積基金」及/或「我的 65 歲後基金」。 Note: De-risking mechanism would not apply to standalone My Choice Core Accumulation Fund and/or My Choice Age 65 Plus Fund.				
總計 TOTAL			100%	100%

注意：如有修改，請於簽名作實。 Other Parties contribute if any amendment is made.

DIS is subject to AMV 1/2017 and 1/2018.

**(IV) 中銀保誠信託收集個人資料聲明 BOCP T PERSONAL INFORMATION COLLECTION STATEMENT ("BOCP T PICS")**

申請人/成員明白及同意中銀國際英國保誠信託有限公司（「中銀保誠信託」）可將收集的任何個人資料（不論從本申請表或以其他途徑收集）作以下用途：  
Applicant / Member(s) understand(s) and consent(s) that, any personal data collected by BOCI-Prudential Trustee Limited ("BOCP T") (whether collected in this application form or otherwise) may be used by BOCP T for the following purposes:

- (i) 處理、管理、實施及執行本文件或任何其他申請人/成員可能不時提交給中銀保誠信託的文件或文件中涉及的要求或交易；  
Processing, administering, implementing and effecting the requests or transactions contemplated in this document or any other documents applicant / member(s) may submit to BOCP T from time to time;
- (ii) 中銀保誠信託的新產品設計或提升現有產品及服務；  
Designing new or enhancing existing products and services provided by BOCP T;
- (iii) 進行客戶調查；  
Conducting customer surveys;
- (iv) 為申請人/成員甄選及參與獎賞、忠誠或特選計劃及相關服務；  
Selecting and participating in reward, loyalty or privileges program and related service for applicant / member(s);
- (v) 與申請人/成員進行通訊，包括向申請人/成員發送可與中銀保誠信託有關任何申請人/成員賬戶的行政通訊或有關未來收集個人資料變化的變更；  
Communicating with applicant / member(s) including to send applicant / member(s) administrative communications about any account applicant / member(s) may have with BOCP T or about future changes to this PICS;
- (vi) 與上述任何一項直接相關的其目的；  
Other purposes directly relating to any of the above;
- (vii) 遵守適用的法律、法規或法院命令。  
Complying with applicable laws, regulation or court order.

中銀保誠信託也可使用申請人/成員的聯絡資料、人口統計資料、投資選擇及累積權益。就有關計劃的產品的推廣資訊，包括電話、郵件、電子郵件、電話短訊或任何電子信息等方法聯絡申請人/成員，除非得到申請人/成員同意(包括表示不反對)。否則中銀保誠信託不可使用申請人/成員資料為用途。如果申請人/成員不同意接收該等推廣資訊，請在本表格的「(v)部分 - 聲明、參與協議及簽署」下的適當方格中填上劃號。

BOCP T may also use applicant / member(s)' contact details, demographic information, investment choices and accrued benefits to contact applicant / member(s) with marketing information regarding the Scheme, including by phone calls, mail, email, SMS or any type of electronic message. BOCP T may not so use applicant / member(s)' data unless BOCP T has received applicant / member(s)' consent (which includes an indication of no objection). Tick the box in appropriate area under "Part (V) - Declaration, Participation Agreement and Signature" in the form if the applicant / member(s) do(es) not consent to receive such marketing information.

中銀保誠信託持有申請人/成員的有關個人資料將被保密，但中銀保誠信託可為以下目的披露申請人/成員的個人資料予：  
Personal data held by BOCP T relating to applicant / member will be kept confidential but BOCP T may disclose member(s)' personal data for the following purposes:

- (a) 申請人/成員的銀行作匯款用途；  
To applicant / member(s)' bank for payment purposes;
- (b) 申請人/成員的匯豐金中商人；  
To applicant / member(s)' MPF intermediaries;
- (c) 中銀保誠信託的關連公司（根據《公司條例》的定義）包括保險公司和金融服務機構；  
To BOCP T's related companies (as defined in the Companies Ordinance) including insurance companies and financial services companies;
- (d) 任何提供行政管理、數據處理、電信、計算、繳款、收債或證券清算、技術外判、客戶熱線服務中心、郵寄及印刷服務的中介、承包商或第三方服務供應商（不論在中銀保誠信託之內或之外及中銀保誠信託的關連公司）與中銀保誠信託相關公司的業務運作有關的服務，以及向申請人/成員提供的服務；  
To any agent, contractor or third party service provider (within or outside BOCP T and BOCP T's related companies) who provides administration, data processing, telecommunications, computer, payment, debt collection or securities clearing, technology outsourcing, call center services, mailing and printing services in connection with the operation of the business of BOCP T and BOCP T's related companies and provision of BOCP T services to applicant / member(s);
- (e) 其他協助收集申請人/會員信息或與申請人/成員聯繫的公司，例如研究公司和評級機構，以增強中銀保誠信託向申請人/成員提供的服務；  
To other companies who help gather applicant / member(s)' information or communicate with applicant / member(s), such as research companies and rating agencies, in order to enhance the services BOCP T provide to applicant / member(s);
- (f) 根據任何法律、法規或法院命令的要求，對中銀香港或其關連公司（在香港境內或境外）有義務向其披露的任何人，該法律、法規或法院命令對中銀香港或其關連公司具有約束力公司（在香港境內或境外）應受監管機構或其他機構發布的任何準則的約束或相輔其目的，或受其約束、或根據這些目的或目的，由中銀香港或其關連公司（香港境內或境外）遵守；  
To any person to whom BOCP T or its related companies (inside or outside Hong Kong) is under an obligation to make disclosure under the requirements of any law, regulation or court order binding on or applying to or to which BOCP T or its related companies (inside or outside Hong Kong) is subject to, or under and for the purposes of any guidelines issued by regulatory or other authorities with which BOCP T or its related companies (inside or outside Hong Kong) is expected to comply;
- (g) 有關僱主；及  
Relevant employer(s); and
- (h) 按法例要求或准許的其他人仕。  
As otherwise required or permitted by law.

中銀保誠信託也可就法例准許或獲得申請人/成員的同意後披露或將申請人/成員的個人資料作其他用途。  
BOCP T may also use and disclose member(s)' personal data in other ways with applicant / member(s)' consent or as otherwise required or permitted by law.

申請人/成員明白申請人/成員所提供之個人資料均屬自願，但如未能提供所要求的資料將可能導致中銀保誠信託無法處理申請人/成員的申請。申請人/成員有權要求查閱及更改由中銀保誠信託持有的任何個人資料。如有此需要，請致函香港太古城英皇道 1111 號 15 樓 1507 室，向中銀國際英國保誠信託有限公司資料保障主任提出。

Applicant / Member(s) understand(s) that the information applicant / member(s) provided is on voluntary basis, but failure to provide the requested personal data may mean BOCP T is unable to process applicant / member(s)' application. Applicant / Member(s) has / have the right to seek access to and request correction of any personal data BOCP T holds by sending a written request to the Data Protection Officer of BOCI-Prudential Trustee Limited at Suite 1507, 15/F, 1111 King's Road, Taikoo Shing, Hong Kong.

中銀保誠信託收集個人資料變明的修訂：

中銀保誠信託保留權利可隨時且在無須通知的情況下增添、修改、更新或修訂上述收集個人資料聲明，我們僅知會閣下有關於修改、更新或修訂，倘我們決定修改我們的個人資料政策，我們將於我們的網站或以書面形式知會閣下有關於修改，從而讓閣下能得悉我們所收集的資料，我們如何使用該資料及在何種情況下會披露該資料。任何有關修改、更新或修訂將在刊登後即時生效。

Amendments to BOCP T PICS:

BOCP T reserves the right, at any time and without notice, to add to, change, update or modify the above PICS, simply by notifying you of such change, update or modification, if we decide to change our personal data policy, those changes will be notified to you either on our website or in writing so that you are always aware of what information we collect, how we use the information and under what circumstances the information is disclosed. Any such change, update or modification will be effective immediately upon posting.

Version as at Nov 2022 (MY EE Form-MKVC)

**(V) 聲明及簽署 DECLARATION AND SIGNATURE**

- (1) 本人在此聲明申請加入我的強積金計劃「(本計劃)」，並同意遵守該計劃之信託契約條款。  
I apply for membership of My Choice Mandatory Provident Fund Scheme (the "Scheme") and agree to be bound by the terms of the trust deed establishing the Scheme and the governing rules thereof.
- (2) 本人確認已收到、閱讀並明白最新版本之本計劃的強積金計劃說明書(及其附錄)。  
I confirm that I have received, read and understood the latest version of the MPF Scheme Brochure (and any addenda thereto) of the Scheme.
- (3) 本人確認此申請表上提供的所有資料均為真實及準確無誤。本人並承諾若提供之資料有任何變更，本人將在合理及切實可行之情況下盡快通知中銀國際英國保誠信託有限公司「(受託人)」。  
I confirm that all the information provided in this application form is true and accurate in all aspects. I further undertake that if there is any change in the information so provided, I shall notify BOCI-Prudential Trustee Limited (the "Trustee") of such change as soon as reasonably practicable.
- (4) 本人現授權僱主由本人的薪金中扣除本人在該計劃所列的僱員強制性及自願性(如適用)供款。  
I authorize my employer to make regular deductions from my salary for my mandatory and voluntary (if any) contributions under the Scheme.
- (5) 如本人於離職三個月後(或不時就強制性公積金計劃(一般)規例所規定)未能向受託人就本人在該計劃下之累積權益提出任何轉移指示，本人同意受託人將本人該等的累積權益轉移至該計劃之個人賬戶內繼續投資。  
I consent to the Trustee to transfer my accrued benefits under the Scheme to a personal account of the Scheme if I fail to make an election to transfer such accrued benefits within 3 months (or subject to The Mandatory Provident Fund Schemes (General) Regulation from time to time determine) after the Trustee has been notified of cessation of my employment.
- (6) 本人同意僱主向受託人或其附屬公司提供任何本人的資料以便處理本人就參與該計劃之中請及管理在該計劃下的供款、累積權益及其他有關之事宜。本人並同意向受託人或其附屬公司提供任何有助上述事宜的資料。  
I consent to my employer providing the Trustee or its associated companies with any information required for the processing of my application for participation in the Scheme, the administration of my contributions, accrued benefits under the Scheme (and including but not limited to marketing and data processing) and any other purposes in relation to thereof. I further consent to provide the Trustee or its associated companies with any information required for the above purposes.
- (7) 本人明白若本人未能提供此表格所要求之資料，受託人將不能處理本人之申請。本人確認已閱讀、明白及同意(V)部內的中銀保誠信託收集個人資料聲明。  
I acknowledge that failure to provide the data requested in this form may result in the Trustee being unable to process my application. I confirm that I have read, understood and agreed to the BOCPT PICs in Part (IV).
- (8) 本人知悉及同意，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稅務管轄區的稅務當局，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)。  
I acknowledge and agree that the data collected may be transmitted by the Trustee to the Inland Revenue Department 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).
- (9) 本人承諾，如本人的稅務居住地位相關的情況有所改變，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。  
I undertake to notify the Trustee within 30 days if there is any change in circumstances relating to my status of tax residency(ies) that makes any of the information provided in any parts of the self-certification in this form incorrect or incomplete and provide an updated self-certification form.
- 以下段落(第 10 至 12 點)有關本人(前)授權僱主使用強積金中介人服務。The Paragraph 10 – 12 below are related to my authorisation of the use of MPF intermediary services as referred to Part (i) set forth below.
- (10) 本人知悉及同意，僱主在強積金中介人提供/使用其資訊的服務，準確性和完整性上並無代表權及法律責任，及向受託人在因強積金中介人濫用或披露資訊於任何其他第三者而對本人引起之任何損害上並無責任。  
I acknowledge and accept that (i) the Trustee makes no representation and accepts no legal responsibility for the services, the accuracy and completeness of the information provided and / or used by the MPF Intermediary; and (ii) the Trustee shall not be held liable for any damages caused to me which may arise out of or in connection with the misuse of the information or disclosure of the information to any third party / parties by the MPF Intermediary.
- (11) 本人知悉及接受，強積金中介人同意書與本表格同時生效，並保持其效力直至(非)本人遞交「撤銷同意披露資料予強積金中介人資料通知書 - 僱員成員」以廢銷；及向受託人遞交及接收其「撤銷同意披露資料予強積金中介人資料通知書 - 僱員成員」。  
I acknowledge and agree that the MPF Intermediary Authorization shall take effect on the date of this form and remain in force unless and until (i) it is revoked by me by submitting the "Revocation Notice for Consent of Disclosure of Particulars to MPF Intermediary - Employee Member"; and (ii) the Trustee has been notified of and has received the "Revocation Notice for Consent of Disclosure of Particulars to MPF Intermediary - Employee Member".
- (12) 本人同意及接受，「撤銷同意披露資料予強積金中介人資料通知書 - 僱員成員」將於受託人接收後十四天內生效，並以較晚者為準。  
I agree and accept that the "Revocation Notice for Consent of Disclosure of Particulars to MPF Intermediary - Employee Member" shall take effect within 14 days after the Trustee receives the Form, whichever is the later.
- (13) 為了透過自動櫃員機及/或其他渠道，包括但不限於網上銀行、手機銀行、綜合銀行結單及分行網絡等(「銀行服務」)獲得本人的強積金賬戶的最新資料，本人同意並授權受託人將本人的個人資料轉移至以下銀行：  
In order to obtain the latest information of my MPF account via Automatic Teller Machine ("ATM") and / or such other channels, including but not limited to internet banking, mobile banking, consolidated bank statement and branch network etc ("Bank Services"), I agree and authorize the Trustee to transfer my personal data to the following banks:
- 中國銀行(香港)有限公司  
Bank of China (Hong Kong) Limited
  - 南洋商業銀行有限公司  
Nanyang Commercial Bank, Limited
  - 聚友銀行有限公司  
Chi Yu Banking Corporation Limited
- 如果閣下不同意根據中銀保誠信託收集個人資料聲明提供、使用及轉移閣下的個人資料作直接促銷目的，請在左面的方格填上「✓」。如果閣下沒有在方格中填上「✓」，則表示閣下已同意提供、使用和轉移其個人資料作直接促銷目的。  
Please tick the box if you do not agree with the provision, use and transfer of your personal data for direct marketing purposes in accordance with the BOCPT PICs. If you do not tick the box, you are deemed to have given your consent for the provision, use and transfer of your personal data for direct marketing purposes.
- 如果閣下不同意根據中銀保誠信託收集個人資料聲明提供、使用及轉移閣下的個人資料作銀行服務，請在左面的方格填上「✓」。如果閣下沒有在方格中填上「✓」，則表示閣下已同意提供、使用和轉移其個人資料作銀行服務。  
Please tick the box if you do not agree with the provision, use and transfer of your personal data for Bank Services in accordance with the BOCPT PICs. If you do not tick the box, you are deemed to have given your consent for the provision, use and transfer of your personal data for Bank Services.

<p>申請人簽署 Applicant Signature</p> <p style="font-size: 2em; text-align: center;"><i>Chan Tai Man</i></p>	<p>申請人姓名 Applicant Name</p> <p style="text-align: center;">Chan Tai Man</p> <hr/> <p>日期 Date (日 DD/月 MM/年 YYYY)</p> <p style="text-align: center;">01/11/2022</p>
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Sign by employee and date the form

**(VI) 受聘資料 (由僱主填寫) EMPLOYMENT DETAILS (For Employer Use Only)**

受聘日期  
Date of Employment      [ ] [ ] 日 DD    [ ] [ ] 月 MM    [ ] [ ] [ ] [ ] 年 YYYY

Complete by Employer

參與計劃日期  
Date Joined Scheme      [ ] [ ] 日 DD    [ ] [ ] 月 MM    [ ] [ ] [ ] [ ] 年 YYYY

供款次數  
Frequency of contributions       每月一次 Monthly  
 每半月一次 Semi-Monthly  
 其他 - 請說明 Other - please specify: \_\_\_\_\_

**自願性供款專用 Voluntary Contributions Only**

參與自願性供款計劃日期  
Date Joined Voluntary Contribution Plan      [ ] [ ] 日 DD    [ ] [ ] 月 MM    [ ] [ ] [ ] [ ] 年 YYYY

自願性供款歸屬起計日期  
Vesting Date of Employer's Voluntary Contributions      [ ] [ ] 日 DD    [ ] [ ] 月 MM    [ ] [ ] [ ] [ ] 年 YYYY

職級  
Grade \_\_\_\_\_

**備註 Remarks:**  
如選擇自願性供款的僱主，請一併遞交已填寫的「自願性供款資料附頁」<MY SUPA FORM>。參與自願性供款計劃日期、自願性供款歸屬起計日期及自願性供款歸屬比例將以「自願性供款資料附頁」<MY SUPA FORM>所填寫的資料為本。If the employer wishes to make voluntary contributions, please submit to us a completed "Supplementary Voluntary Contribution Form" <MY SUPA FORM>. Date joined the Scheme, date joined voluntary contribution plan and vesting scale of benefits will be based on the information shown on "Supplementary Voluntary Contribution Form" <MY SUPA FORM>.

授權簽署及公司印章 Authorized Signature(s) with Company Chop	日期 Date (日 DD/月 MM/年 YYYY)
Sign by authorized person of your company with company chop	01/11/2022

**(VII) 附錄 APPENDIX**

有關「e-成員」事先同意書的客戶通知(僅適用於(i)部選擇成為「e-成員」之人仕):  
Prior Consent for "e-Member" Services (only applicable to person who elects to become a "e-Member" in Part (I)):

本人(「收件人」)特此同意中銀國際英國保誠信託有限公司(「送件人」)透過下述電子方式給予所有有關我的強積金計劃(本計劃)之通知及文件予作為本計劃成員的本人。  
I (the "recipient") hereby consent to BOCI-Prudential Trustee Limited (the "sender") giving all notices and documents in relation to the My Choice Mandatory Provident Fund Scheme (the "Scheme") to me as a member of the Scheme by the following electronic means.

此同意書適用的所有通知及文件，包括 This consent applies to all notices and documents, including:
<ul style="list-style-type: none"> <li>• 權益報表 Benefit Statements</li> <li>• 更改基金組合報表 Fund Re-Balancing Statement</li> <li>• 更改新供款投資組合報表 Change of Investment Mandate Statement</li> <li>• 其他不時於送件人網站公佈之通知及文件 Other notices and documents as published from time to time on the sender's website</li> <li>• 特別/可扣稅自願性供款確認書 Confirmation for Special/Tax Deductible Voluntary Contribution</li> <li>• 特別/可扣稅自願性供款基金單位贖回報表 Unit Withdrawal Statement for Special/Tax Deductible Voluntary Contribution</li> <li>• 信託契約/強積金計劃說明書的修訂通知、新服務公告 Trust Deed/Notice of MPF Scheme Brochure amendment, new services announcement</li> </ul>

本人同意透過以下方式接收所有有關本計劃之通知及文件 I agree to receive all notices and documents in relation to the Scheme by the following means:

- 透過發送方網站 www.bocpt.com → 登入賬戶 → 電子報表將上述通知及文件傳送至收件人  
by making the notices and documents available to the recipient on the sender's website www.bocpt.com → Account Login → e-Statement
- 以及透過電子郵件或手機短訊將(告知收件人可收取上述通知及文件的)「電子提示」傳送至收件人於本表格(i)部的電郵地址或流動電話(必填)  
by notifying the recipient via "e-Alert" of the availability of the notice and document to the recipient's email address or through mobile device stated in Part (i) of this form (compulsory)

Version as at Nov 2022 (MY EE Form-MCV)

**(VII) 附錄 (續) APPENDIX (CONT'D)**

並將此同意書適用於：本人在此表格的強積金賬戶 In relation to: The MPF account of this form held under the Scheme

- 若「e-成員」服務已應用於現有僱員賬戶，當其權益轉移至個人賬戶時，如收件人之前在本計劃並無個人賬戶，可繼續享用此項服務；反之，若收件人之前在本計劃已有個人賬戶（但並未使用「e-成員」服務），儘管「e-成員」服務應用於現有僱員賬戶，當其轉為相應的個人賬戶時，則不可繼續沿用此項服務。

While the recipient may retain the consent to use "e-Member" services applicable to his/her current employee account when his/her accrued benefits are transferred to a personal account, provided that the recipient has no pre-existing personal account under the Scheme, but not vice versa - the "e-Member" services applicable to the recipient's current employee account will be discontinued when such account is transferred to the pre-existing personal account to which "e-Member" services are not applicable.

本人（「收件人」）現已閱讀、明白並同意 I (the "recipient") have read, understood & agreed that:

**透過網站提供通知及其他文件的期限 Duration of availability of the notices or other documents on the website:**

- 任何按照同意書而透過送件人的網站或以其他電子方式提供的該等通知或文件，將於收件人獲知會該等通知或文件可供取閱後最少 24 個月期間，持續透過送件人的網站或以該其他電子方式提供。  
Any notices or documents made available on the sender's website or by other electronic means in accordance with this consent will be available on that website or by that other electronic means for a minimum of 24 months after the recipient has been notified of its availability.
- 如收件人不再是本計劃的成員，則上述有關保留期限的條款不再適用。送件人將應要求以法例准許的其他方式向收件人送交通知或文件（只限於本應保留在該網站或以該電子方式保留的通知或文件），而收件人無須就此支付任何額外費用。  
These terms about the retention period will cease to apply if the recipient ceases to be a member of the Scheme. The sender shall, upon request, send the notices or documents (which should otherwise be retained on that website or by that electronic means) to the recipient by other means permitted by law at no additional cost to the recipient.

**給予通知或其他文件的其他方法 Alternative method of giving notices or other documents:**

當送件人得悉未能透過已同意的方式把通知或其他文件或其中任何部分成功給予收件人，送件人須主動以法例准許的其他方式向收件人送交該通知或文件，而收件人無須就此支付任何額外費用。

When the sender becomes aware that a notice or other document or any part of it cannot be successfully given to the recipient through the means consented to, the sender shall on its own initiative give the notice or document to the recipient by other means permitted by law at no additional cost to the recipient.

**撤回 Revocation:**

- 收件人可隨時以交付、郵寄或送件人指明的其他額外方式（例如透過送件人的網站或熱線中心）向送件人事先發出不少於 14 日的通知，以撤回同意，而有關撤回將於通知期屆滿後生效。如出現下列情況，同意書亦當作被收件人撤回：(i) 送件人得悉收件人未能透過同意適用的方式成功收到有關通知、文件或獲知會有關通知或文件可供取閱的通知給予收件人，而送件人在得悉有關情況後的 60 日內，未能就該同意適用的方式取得收件人的最新聯絡資料；或(ii) 送件人知悉收件人身故或精神上無行為能力。  
This consent may be revoked by the recipient at any time by giving not less than 14 days' prior notice to the sender by delivery, post, or other additional means specified by the sender (e.g. through the sender's website or call centre), and the revocation will take effect upon the expiry of the notice period. The consent is also deemed to be revoked by the recipient (i) when the sender becomes aware that the notices, documents or the notification of availability of notices or documents cannot be successfully given to the recipient through the means to which this consent applies and the sender, within a period of 60 days after becoming so aware, cannot obtain the recipient's updated contact details for the means to which the consent applies or; (ii) where the sender has notice of the death or mental incapacitation of the recipient.
- 當同意書被撤回或當作被撤回後，送件人須以法例准許的其他方式給予收件人通知或其他文件，而收件人無須就此支付任何額外費用。  
Upon the revocation or deemed revocation of the consent, the sender shall give notices or other documents to the recipient by other means permitted by law at no additional cost to the recipient.

**更改資料 Changes:**

收件人可隨時以交付、郵寄或送件人指明的其他額外方式（例如透過送件人的網站或熱線中心）向送件人事先發出不少於 14 日的通知，以更新其聯絡資料。

The recipient may update his/her contact details at any time by giving not less than 14 days' prior notice to the sender by delivery, post or other additional means specified by the sender (e.g. through the sender's website or call centre).

**確認更改資料 Confirmation of changes:**

送件人將於收件人給予或撤回同意書或更改其聯絡資料後 14 日內，以法例准許的方式向收件人發出確認通知。

The sender will give a confirmation notice by means permitted by law to the recipient within 14 days after the recipient has given or revoked consent or has changed his/her contact details.

公司專用 For Official Use Only	Input by :	Date :	Verified by :	Date :
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### **2.3 Scheme Member's Request For Fund Transfer**

You may recruit new employees from time to time. The new-joined employees may intend to transfer their accrued benefits from the original trustee to your registered MPF account with *BOCPT*. For this process, employers should assist the employees to complete and return the following documents to *BOCPT*:-

- (i) "Scheme Member's Request For Fund Transfer Form" 《*FORM MPF (S) -P(M)*》; and
- (ii) "Member Enrolment Form" 《*MY EE FORM-MC-VC*》

*BOCPT* will then instruct with the original trustees of the employees on this transfer arrangement. A statement showing the transferred accrued benefits amount will be issued to the employees upon completion of this transfer.

#### **Notes for Completion of "Scheme Member's Request For Fund Transfer Form":-**

The "Scheme Member's Request For Fund Transfer Form" comprises of five sections:-

- Section I: Complete the personal details of the new employee.
- Section II: Complete the details of the employee's original trustee.
- Section III: Complete the name of Employer, name of the participating scheme and scheme number and insert the name of new trustee as "BOCI-Prudential Trustee Limited".
- Section IV: If the accrued benefits are fully transferred to the new trustee and there is no residual balance in the MPF member account, the said account will be terminated.
- Section V: To facilitate the processing of the employee's request for fund transfer, employee should authorize us to obtain the necessary information from the original trustee by signing the form.

Sample of “Scheme Member’s Request For Fund Transfer Form”



第 MPF(S) - P(M)號表格  
FORM MPF(S) - P(M)

計劃成員資金轉移申請表  
SCHEME MEMBER'S REQUEST FOR FUND TRANSFER FORM  
(適用於自僱人士、個人帳戶持有人或終止受僱的僱員)  
(for self-employed person, personal account holder or employee ceasing employment)  
(強制性公積金計劃(一般)規例)(第485A章)第145、146、147、148及149條  
Sections 145, 146, 147, 148 and 149 of the Mandatory Provident Fund Schemes (General) Regulation (Cap 485A)

- (a) 請用正楷填寫本表格。  
Please use BLOCK LETTERS to complete this Form.
- (b) \*請刪去不適用者。請在下適用處填上“不適用”。  
\*means delete whichever is inappropriate. Please insert "N/A." if not applicable.
- (c) 你以此項轉移申請提供的個人資料，將用作處理你的轉移申請。你提供的個人資料可能會為該目的而轉交相關代理人、相關服務提供者，以及政府或規管機構，包括強制性公積金計劃管理局（「積金局」）。  
The personal data to be supplied in support of this election of transfer are to be used for processing your election of transfer. The personal data you supply may, for such purpose, be transferred to the trustee(s) concerned, the relevant service provider(s), and the government or regulatory bodies including the Mandatory Provident Fund Schemes Authority ("MPFA").

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

(1) 姓名:(與你的香港身份證上的姓名相同\*)  
Name: (as shown on your Hong Kong Identity (HKID) Card<sup>Note 1</sup>)

(a) 姓氏: Chan 陳  
Surname: \_\_\_\_\_

(b) 名字: Tai Man 大文  
Other Name: \_\_\_\_\_

(2) 身份證明:  
Identification:

(a) 香港身份證號碼: A123456(7)  
HKID Card number: \_\_\_\_\_

(b) 護照號碼: \_\_\_\_\_  
Passport number: \_\_\_\_\_  
(本欄~~僅~~沒有香港身份證的計劃成員填寫) (ONLY for scheme member without HKID Card)

(3) 聯絡資料:  
Contact details:

(a) 日間聯絡電話號碼: 2000 0000  
Daytime contact number: \_\_\_\_\_

(b) 手提電話號碼: 9000 0000  
Mobile phone number: \_\_\_\_\_

(c) 電郵地址(如有): \_\_\_\_\_  
Email address (if any): \_\_\_\_\_

(4) 通訊地址:  
Correspondence address:

B	10	A	HOT MING BUILDING
室 Flat/ Room 樓層 Floor 座 Block 大廈 Building			
		3	HOT MING STREET
座落 Estate		街道號碼 Street no. 街道 Street	
* 香港/九龍/新界/其他(請註明) * Hong Kong / Kowloon / N.T. / Others (please specify)			
國家 / 地區名稱 (如非香港以內) Country / Region (if not in Hong Kong)			

如住宅地址同上，便無須填寫  
No need to provide residential address if same as above

住宅地址:  
Residential Address:

室 Flat/ Room 樓層 Floor 座 Block 大廈 Building			
座落 Estate		街道號碼 Street no. 街道 Street	
* 香港/九龍/新界/其他(請註明) * Hong Kong / Kowloon / N.T. / Others (please specify)			
國家 / 地區名稱 (如非香港以內) Country / Region (if not in Hong Kong)			





第 II 部 – 轉移資料

SECTION II – TRANSFER INFORMATION

(5) 原計劃的強積金帳戶資料：  
MPF account information in the original scheme:

原受託人名稱<sup>2</sup>： EGF TRUSTEE LIMITED  
Name of original trustee<sup>2</sup>： \_\_\_\_\_

原計劃名稱<sup>2</sup>： EFG MPF  
Name of original scheme<sup>2</sup>： \_\_\_\_\_

強積金帳戶類別（請選擇以下其中一個帳戶並於適當方格內填上✓號）：  
Type of MPF account (please select ONE of the following accounts and ✓ as appropriate):

個人帳戶 OR  供款帳戶  
Personal account OR Contribution account

計劃成員帳戶號碼<sup>2</sup>： 300 1111 1111  
Scheme member's account number<sup>2</sup>： \_\_\_\_\_

(6) 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權益轉出）：  
Details of former employment (applicable for employee who wishes to transfer-out the benefits from a contribution account after cessation of employment):

前任僱主名稱： \_\_\_\_\_  
Name of former employer: \_\_\_\_\_

僱主識別號碼<sup>3</sup>： \_\_\_\_\_  
Employer's identification number<sup>3</sup>： \_\_\_\_\_

(7) 自僱人士身份詳情（只適用於自僱人士）  
Details of self-employed status (applicable for self-employed person only):

請於適當方格內填上✓號，表明申請轉移的原因：  
Please indicate your reason of transfer and ✓ as appropriate.

終止自僱，生效日期是：  
Cessation of self-employment, with effect from: \_\_\_\_\_  
日 DD 月 MM 年 YYYY

本人將會維持自僱，並把本人的權益轉移至第 III(8)部所述的另一個計劃。本人向原計劃供款的最後日期是：  
I will remain in self-employment and my benefits will be transferred to another scheme stated in section III(8). Contributions to the original scheme should be paid up to: \_\_\_\_\_  
日 DD 月 MM 年 YYYY

第 III 部 – 轉移選擇

SECTION III – TRANSFER OPTION

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

本人選擇把在第 II(5)部所述帳戶內由強制性供款所產生的權益轉移至以下帳戶（請選擇(a)、(b)或(c)，並於適當方格內填上✓號）：  
I elect to transfer the benefits derived from the mandatory contributions in my account stated in section II(5) to the following account (Please select option (a),(b) OR (c) and ✓ as appropriate):

(a) 轉移至本人新僱主為本人開立的供款帳戶  
To my contribution account with my new employer

新受託人名稱<sup>4</sup>： \_\_\_\_\_  
Name of new trustee<sup>4</sup>： \_\_\_\_\_

新計劃名稱<sup>4</sup>： \_\_\_\_\_  
Name of new scheme<sup>4</sup>： \_\_\_\_\_

計劃成員帳戶號碼<sup>4</sup>： \_\_\_\_\_  
Scheme member's account number<sup>4</sup>： \_\_\_\_\_

新僱主名稱： \_\_\_\_\_  
Name of new employer: \_\_\_\_\_

僱主識別號碼<sup>3</sup>： \_\_\_\_\_  
Employer's identification number<sup>3</sup>： \_\_\_\_\_

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

新受託人名稱<sup>4</sup>： BOCI-Prudential Trustee Limited  
Name of new trustee<sup>4</sup>： \_\_\_\_\_

新計劃名稱<sup>4</sup>： My Choice MPF Scheme  
Name of new scheme<sup>4</sup>： \_\_\_\_\_

計劃成員帳戶號碼<sup>4</sup>： \_\_\_\_\_  
Scheme member's account number<sup>4</sup>： \_\_\_\_\_

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

- (9) 有關本人在第 III(5)部所述帳戶內的自願性供款<sup>註 3</sup> (如有)的安排。  
Arrangement of my voluntary contributions<sup>Note 3</sup> (if any) in my account stated in section III(5).

請選擇(a)或(b)，並於適當方格內填上✓號：

(備註：如你沒有作出任何選擇，而帳戶內有由自願性供款所產生的權益，則該等權益將以處理第 III(8)部所述權益的同樣方式處理。如你已在第 III(9)部作出選擇，而帳戶內並沒有該等權益，則有關選擇將不會獲處理。)

Please select option (a) OR (b) and ✓ as appropriate.

(Remark: If you do not select any options but there are benefits derived from voluntary contributions, those benefits will be handled in the same way as those stated in section III(8). If there are no such benefits in your account and you have made an election in section III(9), the selected option will not be processed.)

<input type="checkbox"/>	(a) 與在第 III(8)部所述由強制性供款所產生的權益一併轉移。 Transferred together with the benefits derived from the mandatory contributions as in section III(8).
<input type="checkbox"/>	(b) 按照原計劃的管治規則提取權益。 Withdrawn in accordance with the governing rules of the original scheme. 如需提取權益，請於遞交此申請時連同香港身份證 / 護照副本一併遞交。 Please submit this application together with a copy of HKID card / Passport for withdrawal. 付款方式 (請在適當方格內填上✓號)： Method of payment (please ✓ as appropriate): (i) <input type="checkbox"/> 支票付款 By cheque (ii) <input type="checkbox"/> 直接存入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，而銀行可能會因此收取費用。詳情請向原受託人查詢。) By depositing directly in a bank account under the name of scheme member only (a bank account under the name of a third party is not applicable). (This option is applicable only to trustees who provide such services and there may be bank charges involved. Please check with the original trustee for details.) 銀行帳戶持有人姓名： Name of bank account holder: _____ 銀行名稱： Name of bank: _____ 銀行帳戶號碼： Bank account number: _____

第 IV 部 – 終止沒有剩餘款項的強積金帳戶 (如適用)

SECTION IV – TERMINATION OF MPF ACCOUNT WITH NO RESIDUAL BALANCE (IF APPLICABLE)

- (10) 本人謹此指示原受託人在把本人於第 II(5)部所述的強積金成員帳戶內的所有權益轉移至新受託人後，以及在該帳戶內並無剩餘款項的情況下，終止該強積金成員帳戶。  
I hereby give the original trustee an instruction to terminate my relevant MPF member account as referred to in section II(5) upon transfer of the full benefits to the new trustee and there is no residual balance in the said account.

第 V 部 – 授權及聲明

SECTION V – AUTHORIZATION AND DECLARATION

- (11) 本人同意，新受託人及積金局可為處理本人的轉移申請，向相關受託人及相關服務提供者披露本人就此項轉移申請提供的資料，或使該等機構 / 人士能夠取覽或披露該等資料。  
I hereby give consent to the new trustee and the MPFA to disclose information supplied by me in support of this election of transfer to the trustee(s) concerned and the relevant service provider(s), or to enable such party or parties to access or disclose relevant information for processing my election of transfer.
- (12) 本人聲明：  
I declare that:  
(a) 本人已閱讀及明白《計劃成員轉移權益須知》及註釋的內容；及  
I have read and understood the Notes to Transfer of Benefits by Scheme Member and the Explanatory Notes; and  
(b) 盡本人所知所信，本表格所提供的資料均屬正確無訛且無缺漏。  
to the best of my knowledge and belief, the information given in this Form is correct and complete.

陳大文

01/04/2020

計劃成員簽署<sup>註 6</sup>  
Signature of the scheme member<sup>Note 6</sup>

日期  
Date

經紀/銀行職員資料 Agent/Bank Staff Information		
銀行編號 Bank Code	分行編號 Branch Code	強積金中介人註冊編號 MPF Intermediary Registration No.
經紀編號/經紀姓名 Agent Code/Agent Name		經紀簽署 Signature of Agent

2.4 **Making Contributions**

2.4.1 **Mandatory Contribution**

Mandatory Contribution is calculated based on the relevant income of the employee. **Relevant Income** includes wages, salaries, leave pay, fee, commission, bonus, gratuity, perquisite or allowance (including housing allowance or other housing benefits), but excludes severance payments or long service payments.

According to Mandatory Provident Fund Schemes (Amendment) Ordinance 2008, the special treatment of excluding housing allowance and other housing benefit had been removed from the definition of “relevant income”. With effect from 1 November 2008, housing allowance and other housing benefit are treated on the same basis as other remuneration items and any such item will be included in calculating MPF contributions if it satisfies the criteria for “relevant income”.

The minimum level of relevant income has been amended to \$7,100, effective 1 November 2013, from the original level of \$6,500. For the contribution periods starting on or after the effective date, employees with a monthly relevant income less than \$7,100 are not required to make the employee’s part of contribution, but their employers have to make the employer’s part of contribution.

The maximum level of relevant income has been raised from \$25,000 to \$30,000 per month, with effect from 1 June 2014 (i.e. employer’s and employee’s maximum contribution are both capped at HK\$1,500 per month).

For those employees with remuneration more frequently than on a monthly basis, the minimum and maximum relevant income level will be based on the daily rates of HK\$280 (effective 1 November 2013) and HK\$1,000 (effective 1 June 2014) respectively.

Subject to the maximum and minimum level of relevant income, Employer should deduct 5% from the payroll together with 5% of Employer’s portion pay to the trustee on or before each relevant contribution day.

The rate of contributions and the statutory minimum and maximum level of relevant income may be changed under the Mandatory Provident Fund Schemes Ordinance (“the MPF Ordinance”) and the Mandatory Provident Fund Schemes (General) Regulation (“the MPF Regulation”) from time to time. Please refer to the latest announcement of the Mandatory Provident Fund Schemes Authority for updated regulatory requirements.

**Contribution Day** means the 10<sup>th</sup> calendar day after the last day of the calendar month within which the relevant contribution period ends.

2.4.2 **Voluntary Contribution**

Both employer and employee members may choose to make additional contribution, **voluntary contribution**. Unlike mandatory contribution, Employers can determine the vesting rules on employer’s voluntary contribution for their employees. Similarly, employees can also make their own voluntary contribution to meet their own retirement objectives.

Employer elects to make Voluntary Contribution	Employee elects to make Voluntary Contribution	Options for making Voluntary Contribution
Yes	No	Employer can choose to make voluntary contribution in a fixed amount or percentage of relevant income.
Yes	Yes	If the Employer has intended to make voluntary contribution to the employee, employer can choose to make voluntary contribution in a fixed amount or percentage of relevant income and such an employee needs to select:-  (i) the same basis of the employer’s voluntary contribution rate; <i>or</i> (ii) 3%, 5% or 10% of his/her relevant income/basic income.
No	Yes	Employee can choose to make his/her own voluntary contribution in a fixed amount of \$300, \$500 or \$1,000 for each contribution period.

Employer and employee members should notify *BOCPT* in writing in the event of any changes to the voluntary contribution. It is advised that employers should serve notice in advance to their employees on any changes they intend to make.

### 2.4.3 Special Voluntary Contributions and Tax Deductible Voluntary Contributions

Members can also apply for making Special Voluntary Contributions and Tax Deductible Voluntary Contributions. Please enquire *BOCPT* for details.

### 2.4.4 Contribution Period & Contribution Day

A contribution period is defined as a period for which an employer pays or should pay relevant income to the employees. Simply to say, the contribution period is normally same as the payroll period. Employers should pay contributions and provide to *BOCPT* with a “Remittance Statement” on or before the contribution day.

Employer should calculate and deduct contributions for each payroll period.

For those employees with a monthly payroll cycle, Employers should pay the contribution to *BOCPT* within the first 10 days after each payroll period.

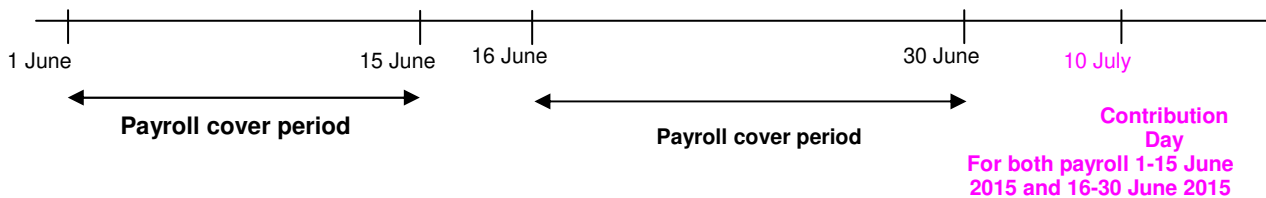
Example (1): Payroll cover period: 1st to 30th June 2015

**Contribution Day: 10th July 2015**

For those employees with payroll cycles more frequent than monthly, Employer should pay the contributions of the payroll cycles of that month in a one single contribution payment to *BOCPT* within the first 10 days of the following month, with contribution details listed separately.

Example (2): Payroll cover period: 1st to 15th June 2015 and 16th to 30th June 2015

**Contribution Day for the month of June 2015: 10th July 2015.**



Employer should calculate and deduct employee's contribution from the payroll after the completion of the first 60 days of employment.

For employees with a monthly payroll cycle, the employee's contribution for the first incomplete payroll cycle immediately following the 30-day contribution holiday will be waived. Employers' contributions should continue to be counted from the first day of employment.

Example (1): A new employee with a monthly payroll cycle (first day of the month to month end).

Date of employment: 15<sup>th</sup> February 2015

30<sup>th</sup> day of employment: 16<sup>th</sup> March 2015

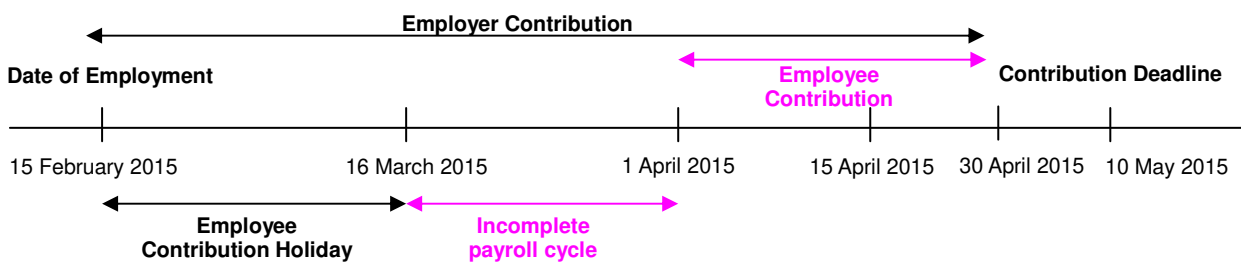
60<sup>th</sup> day of employment: 15<sup>th</sup> April 2015

30 day employee's contribution holiday: 15<sup>th</sup> February to 16<sup>th</sup> March 2015.

Date of commencement of employee contribution: **1<sup>st</sup> April 2015 (i.e. exemption period is 30 day contribution holiday and the first incomplete payroll cycle for the period from 17<sup>th</sup> March to 31<sup>st</sup> March 2015)**

Date of commencement of employer contribution: **15<sup>th</sup> February 2015** (i.e. starts from the first day of employment)

Deadline for paying contribution: 10<sup>th</sup> May 2015



#### **2.4.5 Remittance Statement**

Employers should always make contributions and provide a “Remittance Statement” (*FORM ER-REMITTANCE*) to *BOCPT* showing the “relevant income”, the mandatory contribution and if any, voluntary contribution amounts for each contribution period in respect of the relevant employees.

##### **Notes for Completion of “Remittance Statement”:-**

Use separate “Remittance Statement” for each contribution period. Fill in the name of Employer, scheme number and covering period.

Part I: Complete this part only for those new-joined employees.

Part II: Complete this part for the existing employees.

Part III: Complete this part only for those leaving employees.

1. Complete the date of employment for all new employees, if any.
2. Ensure “Member Enrolment Form” of the new employee(s) have been submitted to *BOCPT*.
3. Mark “0” on the remittance statement in case the employee has no relevant income for the contribution period (i.e. no salary paid).
4. Clearly state the mandatory contribution and if any, voluntary contribution for each contribution period. Round up the contribution amount to 2 decimal places.
5. Specify the last contribution detail, termination date and reason for those leaving employees within the contribution period in Part III, if any.
6. Must complete the Request for Refund of Offset Long Service Payment/Severance Payment section if you would like to request for refund after making such payment and attach the required supporting documents to *BOCPT* (refer to the Section 2.6 for details).
7. Sign the “Remittance Statement” by the authorised signature with company chop.
8. Ensure the cheque amount is the same as the total amount calculated in the “Remittance Statement” and staple the cheque with the “Remittance Statement”.

Furthermore, Employers should provide each of your employees with a pay-record within 7 working days after making the contribution to the trustee. To save your time and effort, you can now make use of our support tool, **SmartCon**. By using SmartCon in Excel form, you are able to:-

- ◆ Calculate the contributions.
- ◆ Prepare a “Remittance Statement” to *BOCPT* in a much easier and efficient way.
- ◆ Provide a pay-record to each of your employees.
- ◆ Keep a proper contributions payment records for each of your employees.
- ◆ Generate Autopay files for uploading to PC payroll or CBS Online system.

Sample of "Remittance Statement"

樣本 SAMPLE



中銀國際英國保誠信託有限公司  
BOCI-Prudential Trustee Limited

付款結算書  
Remittance Statement



地址: 中銀國際英國保誠信託有限公司 香港銅鑼灣威利道18號萬國寶通中心25字樓  
To: BOCI-Prudential Trustee Limited 25/F., Citicorp Centre, 18 Whitfield Road, Causeway Bay, Hong Kong  
電郵 Email: mpf@bcopt.com 傳真 Fax: 2151-0999 / 2530-4786 簡易強積金計劃總行行政熱線: 2929-3030  
我的強積金計劃客戶服務熱線: 2929-3366

FORMER-REMITTANCE

僱主名稱 Name of Employer 請用英文字母填寫 Please complete in block letters	ABC Company		計劃名稱 Name of Scheme (請於空格加上"✓" Please put "✓" in the box)	<input type="checkbox"/> 中銀保誠簡易強積金計劃 BOC-Prudential Easy-Choice MPF Scheme <input checked="" type="checkbox"/> 我的強積金計劃 My Choice MPF Scheme
計劃編號 Scheme No.	30123456789	聯絡人及電話號碼 Contact Person & Tel No.	Mr. Chan Tai Man, 2345-6789	供款期: 日/月/年 Contribution period: dd/mm/yyyy
				由 From 01/05/2017 至 To 31/05/2017

**溫馨提示!** 根據強積金法例, 僱主必須在每月的第 10 日之前全數支付強制性供款, 並須同時提交付款結算書及僱員終止服務通知書(如適用), 請預留足夠的文件郵遞及處理時間, 以避免因延誤支付供款而被積金局徵收附加費及罰款。  
**GENTLE REMINDER!** According to the MPF legislation, mandatory contributions (accompanied by the required Remittance Statement and Notice of Termination of Employment (if applicable)) should be made on or before the 10<sup>th</sup> day of each month. Please reserve sufficient documents delivery and processing time to avoid surcharge and penalty imposed by the MPFA arising from late payment.

**第一部分 - 適用於新僱員 Part I - For New Employees**  
(請將本付款結算書連同下列新僱員的成員申請表一併提交) Please submit this remittance statement together with the member enrolment form(s) of following new employee(s)

編號 No.	僱員名稱 Name of Employee	香港身份證/護照號碼 HKID/Passport No.	有關供款期 日/月/年 Relevant Contribution Period dd/mm/yyyy		計算強制性供款之有關入息 Relevant Income for Mandatory Contribution Calculation HK\$	計算自願性供款之入息 Income for Voluntary Contribution Calculation HK\$	僱員供款 Employee's Contributions		僱主供款 Employer's Contributions		受僱日期 日/月/年 Date of Employment dd/mm/yyyy	供款附加費 (如適用) Contribution Surcharge (if applicable) HK\$
			由 From	至 To			強制性供款 Mandatory Contributions HK\$	#自願性供款 #Voluntary Contributions HK\$	強制性供款 Mandatory Contributions HK\$	#自願性供款 #Voluntary Contributions HK\$		
1	EMPLOYEE - 01	A111111(1)	20/04/2017	30/04/2017	\$6,000		\$0	\$300		20/04/2017		
	EMPLOYEE - 01	A111111(1)	01/05/2017	31/05/2017	\$15,000		\$0	\$750		20/04/2017		
第一部分 供款總計 Sub-total amount for Part I								\$1,050				

樣本 SAMPLE



中銀國際英國保誠信託有限公司  
BOCI-Prudential Trustee Limited

付款結算書  
Remittance Statement



地址: 中銀國際英國保誠信託有限公司 香港銅鑼灣威利道18號萬國寶通中心25字樓  
To: BOCI-Prudential Trustee Limited 25/F., Citicorp Centre, 18 Whitfield Road, Causeway Bay, Hong Kong  
電郵 Email: mpf@bcopt.com 傳真 Fax: 2151-0999 / 2530-4786 簡易強積金計劃總行行政熱線: 2929-3030  
我的強積金計劃客戶服務熱線: 2929-3366

FORMER-REMITTANCE

僱主名稱 Name of Employer 請用英文字母填寫 Please complete in block letters	ABC Company		計劃名稱 Name of Scheme (請於空格加上"✓" Please put "✓" in the box)	<input type="checkbox"/> 中銀保誠簡易強積金計劃 BOC-Prudential Easy-Choice MPF Scheme <input checked="" type="checkbox"/> 我的強積金計劃 My Choice MPF Scheme
計劃編號 Scheme No.	30123456789	聯絡人及電話號碼 Contact Person & Tel No.	Mr. Chan Tai Man, 2345-6789	供款期: 日/月/年 Contribution period: dd/mm/yyyy
				由 From 01/05/2017 至 To 31/05/2017

**溫馨提示!** 根據強積金法例, 僱主必須在每月的第 10 日之前全數支付強制性供款, 並須同時提交付款結算書及僱員終止服務通知書(如適用), 請預留足夠的文件郵遞及處理時間, 以避免因延誤支付供款而被積金局徵收附加費及罰款。  
**GENTLE REMINDER!** According to the MPF legislation, mandatory contributions (accompanied by the required Remittance Statement and Notice of Termination of Employment (if applicable)) should be made on or before the 10<sup>th</sup> day of each month. Please reserve sufficient documents delivery and processing time to avoid surcharge and penalty imposed by the MPFA arising from late payment.

**第二部分 - 適用於現有僱員 Part II - For Existing Employees**

編號 No.	僱員名稱 Name of Employee	香港身份證/護照號碼 HKID/Passport No.	計算強制性供款之有關入息 Relevant Income for Mandatory Contribution Calculation HK\$	計算自願性供款之入息 Income for Voluntary Contribution Calculation HK\$	僱員供款 Employee's Contributions		僱主供款 Employer's Contributions		供款附加費 (如適用) Contribution Surcharge (if applicable) HK\$	
					強制性供款 Mandatory Contributions HK\$	#自願性供款 #Voluntary Contributions HK\$	強制性供款 Mandatory Contributions HK\$	#自願性供款 #Voluntary Contributions HK\$		
1	EMPLOYEE - 02	B222222(2)	\$18,000		\$900		\$900			
2	EMPLOYEE - 03	E333333(3)	\$15,000		\$750		\$750			
第二部分 供款總計 Sub-total amount for Part II								\$3,300		

# 請在不適用處填上「不適用」, # Please insert "N.A." if not applicable.  
請提供不同供款期之僱員資料於獨立付款結算書上。Please use separate remittance statement for those employees with different contribution period.  
沒有任何有關入息的僱員(如正支取無薪假期的僱員)仍須在此部分填報。Employees who do not have any relevant income (such as those on no-paid leave) should also be reported in Part II.

樣本 SAMPLE

付款結算書 Remittance Statement



僱主名稱 Name of Employer: **ABC Company**  
 計劃編號 Scheme No.: **30123456789**  
 聯絡人及電話號碼 Contact Person & Tel No.: **Mr. Chan Tai Man, 2345-6789**  
 計劃名稱 Name of Scheme:  我的強積金計劃 My Choice MPF Scheme  
 付款期: 日/月/年 Contribution period: dd/mm/yyyy 自 From: **01/05/2017** 至 To: **31/05/2017**

第三部分 - 適用於離職僱員 Part III - For Leaving Employees

編號 No.	僱員名稱 Name of Employee	香港身分證/護照號碼 HKID/Passport No.	最後受僱日期 日/月/年 Last Date of Employment dd/mm/yyyy	終止服務原因 Reason for Termination of Employment	僱員供款 Employee's Contributions		僱主供款 Employer's Contributions		是否需索長期服務金/遣散費退款? (Refund of Long Service/Severance Payment Required?)	已支付予有關成員之長期服務金/遣散費金額(如有) [Long Service/Severance Payment Amount paid to the relevant member (if any)]
					強積金供款之有關入息 Relevant Income for Mandatory Contribution	自願性供款之入息 Income for Voluntary Contribution	強積金供款 Mandatory Contributions	自願性供款 Voluntary Contributions		
1	EMPLOYEE - 04	D444444(4)	10/05/2017	01	HK\$ \$10,000	HK\$ \$500	HK\$ \$500		<input type="checkbox"/> 是 <input checked="" type="checkbox"/> 否	

**溫馨提示:** 如有僱員離職, 僱主須在僱員最後受僱日期所在月份的下一月份的供款日或之前, 在付款結算書或「僱員終止服務通知書」上申報僱員離職及作出最後一期供款。  
**GENTLE REMINDER!** When an employee ceases employment, employer should notify the Trustee of the employee's last date of employment via the Remittance Statement or Notice of Termination of Employment and make the last contribution on or before the contribution day in the month following the one in which the last day of employment falls.

第三部分供款總計 Sub-total amount for Part III	<b>\$1,000</b>	
第一至第三部分供款總計 Total Contribution Amount for Part I to Part III	<b>\$5,350</b>	所有部分供款總和 Grand total
第一至第三部分供款附加費, 如適用 Total Contribution Surcharge for Part I to Part III, if applicable		港幣 HKD: <b>\$5,350</b>

付款方法 Payment Method  
 支票 Cheque  自動轉賬 Direct Debit  直接存款 Direct Credit  
 支票號碼 Cheque Number: **234567**  
 支票金額 Cheque Amount: **\$5,350**  
 收款人名稱 Payee Name: **中銀國際英國保誠信託有限公司 BOCI-Prudential Trustee Limited**  
 附註: (1) 如僱主要求把長期服務金/遣散費與僱主供款部分的累積權益對沖或匯入戶口內的累積權益包含僱員自願性供款, 請提供離職原因。  
**支票抬頭及請填寫支票資料(如適用)**  
 Cheque's payee name & please complete cheque's information (if applicable)

本人/我們以簽署此結算書作為聲明此結算書內所提供之資料為真實及正確, 本人/我們明白受託人將不會對此結算書上之疏忽、忽略或不準確資料負責。  
 I/We declare that all information provided in this Statement is true and correct by signing of this Statement. I/We understand that the Trustee will not be held responsible or liable for any incompleteness, omission or inaccuracy of the information contained in this Statement.  
 公司印章(長印) + 負責人簽署 Authorized Signature(s) + Company Chop **1/6/2017**  
 授權簽署及公司蓋章 Authorized Signature(s) with Company Chop 日期 Date

付款結算書 Remittance Statement



注意事項 Points to Note

- 請在付款結算書為所有僱員清楚填報供款金額。如僱員於有關供款期內並無有關入息, 請於供款欄填上「0」。  
Please fill in the contribution amount clearly for ALL employees on the remittance statement. If an employee's relevant income is zero for the relevant contribution period, please mark "0" in the contribution column.
- 若以郵遞方式遞交, 請預留充足的郵遞時間及貼上足額郵票, 以確保郵遞無誤。  
For submission by mail, please reserve sufficient time and affix sufficient stamp to ensure delivery in order.
- 請注意, 強積金中介人並非指定為收取及遞交強積金供款支票和「付款結算書」的正式途徑, 懇請僱主直接遞交供款及有關文件予中銀國際英國保誠信託有限公司。同時, 僱主可透過受託人網頁 www.bocpt.com 登入僱主賬戶, 定期檢視其供款狀況及查看最新資料。  
Please note that MPF intermediaries are not designated as the formal channel to receive the MPF cheques and remittance statement, employers should submit the contributions and relevant documents to BOCI-Prudential Trustee Limited directly. Employers may also check their contribution status and view the latest information regularly via Employer Login Account at Trustee's website www.bocpt.com.
- 僱主可透過受託人網頁 www.bocpt.com 登入僱主賬戶, 輸入及遞交供款資料或上載付款結算書。  
Employer may input and submit the contribution information or upload the remittance statement via Employer Login Account at Trustee's website www.bocpt.com.
- 僱主亦可使用受託人提供的強積金供款計算軟件「易出糧」或「供款靈」以製作電子供款檔案, 免除手寫或郵寄「付款結算書」帶來的繁瑣與不便。  
Employers may also use MPF contribution calculation software "PayEasy" or "SmartCon" provided by Trustee to prepare the electronic contribution data file, you will be free from the hassle of hand-writing and mailing the remittance statement.
- 此付款結算書上所列明之受僱日期必須與相關「成員參加表格」之受僱日期相同。  
The date of employment stated on this remittance statement should be the same as the date of employment of relevant "Member Enrolment Form".
- 僱員年齡介乎滿 18 歲至未滿 65 歲之間, 並連續受僱滿 60 日, 均須參加強積金及作出強積金供款。  
Employees who are at least 18 but under 65 years of age and employed for a continuous period of 60 days or more, they are required to join an MPF scheme and make MPF contributions.
- 如僱員的有關入息少於最低有關入息水平, 該僱員則無須作出強積金供款, 但僱主仍須按該僱員的有關入息的 5% 作出僱主部分的強積金供款。  
If employee's relevant income is less than the minimum relevant income level, such employee is not required to make MPF contributions, but employer still required to make 5% of the employee's relevant income as the employer's part of MPF contributions.
- 新僱員享有 30 天免供期外亦無須就 30 天免供期後首個不完整釐期作出供款, 而僱主就僱員作出的供款則應從僱員受僱首日開始計算。  
New employees are not required to make contributions for the first 30 days of employment and any incomplete payroll period that immediately follows the 30-day period. However, employer should make contributions for their employees from the first day of their employment.
- 請注意, 按法例要求, 僱主必須專時為所有僱員作出強積金供款。如受託人於供款日之後收到供款款項, 則必須依法向強制性公積金計劃管理局(積金局)匯報逾期供款個案, 而積金局將可能向僱主徵收附加費或採取其他執法行動。  
Please note that employers are required to make MPF contributions for all relevant employees in full and on time in accordance with the MPF legislation. Contribution payments received by Trustee after the contribution day will be reported to the Mandatory Provident Fund Schemes Authority ("MPFA") as default contribution. The MPFA may impose surcharge or take other enforcement actions on the concerned employers.

Version of Nov 2022



## **2.5 Notification of Employee Termination**

### **(a) Termination of Employment**

Employers must notify *BOCPT* of cessation of employment of an employee. The last contribution period of such terminated employee should be one of the following days, whichever is the latest :-

- (i) the last day of employment if all outstanding relevant income is paid to the employee on that day; or
- (ii) the last day of contribution period in which all outstanding relevant income is payable to employee after the cessation of work following normal remuneration cycle.

Employers should notify the trustee of the employee's date of cessation of employment through the monthly remittance statement or a written notice on or before the 10<sup>th</sup> day of the following month after the employee ceases employment.

Except for certain exceptional circumstances, accrued benefits derived from mandatory contributions are to be preserved until the employees reach the age of 65. However, the leaving employees can elect to transfer their accrued benefits (derived from mandatory contributions and if any, voluntary contributions) from the existing MPF account to one of the following accounts :-

- (i) a personal account under the existing scheme;
- (ii) a new account with the new employer; or
- (iii) a new account with another approved trustee.

To facilitate the above election, the employees should complete "Scheme Member's Request for Fund Transfer Form" (*FORM MPF(S)-P(M)*). The completed form should be returned to *BOCPT* if such an employee elects to transfer his/her accrued benefits to a separate personal account under the existing MPF scheme. However, if the employee elects to transfer his/her accrued benefits to a MPF scheme under another Trustee, then the form should be submitted to his/her new trustee for such transfer arrangement.

Similarly, for those employees who wish to withdraw their accrued benefit derived from voluntary contributions, they should make this election by completing and returning the said Form to *BOCPT* or to his/her new trustee. Upon requested, *BOCPT* will send the benefits payment to the members directly after completing the termination process.

### **(b) Transfer of employment between associated companies**

In the case of intra-group transfers between associated companies or change of ownership of business where the new employer has assumed to take the long service payment and severance payment liability in respect of an employee, the former employer should specify the termination reason as "**Transfer employment (for intra-group transfer)**" in the "Remittance Statement". Employers can obtain more information via our Customer Service Hotline at 2929-3366.

The 30-day employee contribution holiday does not apply to such intra-group transfer and change of business ownership case.

## **2.6 Offsetting of Long Service Payment/Severance Payment (LSP/SP)**

Employers should pay the long service payment/severance payment to the relevant employees in comply with the Employment Ordinance. Employers can then apply for a refund of the LSP/SP from the vested balance of the accrued benefits attributed to the employer's contributions under MPF scheme in respect of such employee by submitting the following documents to BOCPT:-

- ◆ "Remittance Statement" which clearly states the last contribution date, last contribution amount, termination reason and request for refund of LSP/SP; *and*
- ◆ "Receipt of Long Service Payment (LSP)/Severance Payment (SP)" 《*MY LSP/SP RECEIPT*》 signed by the employee.

If employers intend to make long-service payment/severance payment (LSP/SP) to a leaving employee (and apply for offsetting the LSP/SP with accrued benefits derived from the employer's contributions afterwards), **please contact us before you do so** as soon as practicable to check the net amount of your contributions in relevant employee's MPF account. Otherwise, if part of or all of the accrued benefits derived from your contributions have already been withdrawn on grounds of terminal illness or attaining the statutory retirement age of 65 by the employee in the course of employment, you may find it impossible to be reimbursed after making full payment of LSP / SP to such employee.

The refund amount shall be made in the sequence of the following sub-accounts:

1. Employer's voluntary contributions transferred in (if applicable)
2. Employer's voluntary contributions (if applicable)
3. Employer's mandatory contributions transferred in (if applicable)
4. Employer's mandatory contributions (if applicable)

Employers should also settle all the outstanding contributions, if any.

Furthermore, Employers could assist the leaving member to complete and return the "Scheme Member's Request for Fund Transfer Form" 《*FORM MPF(S)-P(M)*》 to BOCPT or if applicable, to the new trustee.

Sample of “Receipt of Long Service Payment (LSP)/Severance Payment (SP)”



MY LSP/SP RECEIPT

長期服務金 / 遣散費收款證明書  
Receipt of Long Service Payment (LSP) / Severance Payment (SP)

注意 Note:

1. 請以英文正楷填寫。Please complete in BLOCK LETTERS.
2. \*請刪除不適用者。\* Please delete whichever is inappropriate.
3. 僱主需就僱傭條例支付長期服務金或遣散費。根據現時法例，強積金計劃下累算權益中可歸因於僱主供款部分之歸屬餘額可用作抵銷長期服務金或遣散費。我們以下列次序從有關分賬戶作出退款：
  - i. 轉入的僱主自願性供款（如適用）
  - ii. 僱主自願性供款（如適用）
  - iii. 轉入的僱主強制性供款（如適用）
  - iv. 僱主強制性供款（如適用）

Employers are required to pay long service payment or severance payment pursuant to Employment Ordinance. Under current legislation, the long service payment or severance payment can be offset from the vested balance of the accrued benefits attributed to the employer's contributions under MPF scheme. We shall make the payment in the sequence of the following sub-accounts:

- i. Employer's voluntary contributions transferred in (if applicable)
  - ii. Employer's voluntary contributions (if applicable)
  - iii. Employer's mandatory contributions transferred in (if applicable)
  - iv. Employer's mandatory contributions (if applicable)
4. 僱員成員/離世成員之申索人須全數收妥由前任僱主發放之長期服務金/遣散費款項後始填寫此表格。This Form is to be completed by Employee Member / claimant of a deceased member who has received the full Long Service Payment (LSP)/Severance Payment (SP) from his/her former Employer as specified below.
  5. 僱員成員可選擇將其累算權益(由強制性供款及自願性供款(如適用)所衍生)，轉移至現有計劃下的個人賬戶，新僱主的新賬戶或另一個新受託人的新賬戶。為了上述的轉移可以順利辦理，僱員成員必須填寫「計劃成員資金轉移申請表」<<FORM MPF(S)-P(M)>>交回中銀國際英國保誠信託有限公司(「中銀保誠信託」)，或交予新受託人(如適用)。Employee Member can elect to transfer his/her accrued benefits (which derived from the mandatory contributions and voluntary contributions, if any) to a Personal Account under the existing Scheme or to a new account with new employer or a new account with a new trustee. To facilitate this transfer arrangement, Employee Member should complete and return the “Scheme Member's Request for Fund Transfer Form” <<FORM MPF(S)-P(M)>> to BOCI-Prudential Trustee Limited (“BOCPT”) or if applicable, to his/her new trustee.
  6. 若僱員成員未能於中銀保誠信託接獲其有關離職通知後的3個月內提交「計劃成員資金轉移申請表」<<FORM MPF(S)-P(M)>>，成員將被視為將其累算權益轉移至現有計劃下的個人賬戶內。For those Employee Members who fail to submit the “Scheme Member's Request for Fund Transfer Form” <<FORM MPF(S)-P(M)>> within 3 months after BOCPT has been notified of cessation of their employment, they should be considered to have notified to transfer all their accrued benefits to a new Personal Account under the existing Scheme.
  7. 根據《強制性公積金計劃條例》，僱員成員在受僱期間可以指定的理由申索提取部分或全部由僱主部分產生的強積金累算權益。若該僱員成員在終止僱用時涉及抵銷長期服務金或遣散費，則僱主應先與僱員成員及/或受託人查核(i)已由僱主部分提取的權益金額；及(ii)可用於抵銷的權益餘額。In accordance with the Mandatory Provident Fund Schemes Ordinance, employee members may claim for partial or all of the MPF accrued benefits derived from employer portion during employment on certain grounds. When such employee members terminated employment where LSP/SP offsetting with the MPF benefits is involved, employers are reminded to check with the employee members and/or trustee (i) the benefit amount already withdrawn from employer portion; and (ii) the remaining balance available for the offsetting.
  8. 若抵銷長期服務金或遣散費的要求未能在(i)部供款賬戶內的累算權益轉移至僱員成員於本計劃之其他強積金賬戶前處理，在簽署本表格後，則僱員成員同意授權中銀保誠信託從該中銀保誠信託強積金計劃下的強積金賬戶，贖回由其前僱主供款所產生的累算權益的相關基金單位，以用作抵銷長期服務金或遣散費。If the LSP/SP offsetting request cannot be processed before the transfer of accrued benefits held in the contribution account mentioned in Part (i) to the employee member's other MPF accounts under this scheme, by signing this form, the employee member agrees to authorise BOCPT to redeem the relevant fund units from such MPF account under a BOCPT MPF scheme to which his/her accrued benefits derived from the previous employer's contributions for the purpose of the LSP/SP offsetting.
  9. 請呈交填妥並附有親筆簽署之表格正本，傳真本將不獲處理。Please submit the completed form with original signature; fax copy will not be processed.

Version 4/2017/Nov 2022

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  
電郵 email: mpf@bocpt.com

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



(I) 僱主及僱員成員資料

DETAILS OF EMPLOYER AND EMPLOYEE MEMBER

計劃編號 Scheme No. <b>30081234567</b>	僱員成員名稱 Name of Employee Member <b>Chan Tai Man</b>
前任僱主名稱 Former Employer Name <b>ABC Company Limited</b>	最後受僱日期* Last Date of Employment* <b>21/12/2022</b> 日 DD / 月 MM / 年 YYYY
*終止服務原因 *Reason for Termination of Employment	
<input checked="" type="checkbox"/> 終止僱用 Termination <input type="checkbox"/> 退休 Retirement <input type="checkbox"/> 健康問題 Ill-Health <input type="checkbox"/> 解僱 Dismissal <input type="checkbox"/> 完全喪失行為能力 Total Incapacity <input type="checkbox"/> 死亡 Death <input type="checkbox"/> 供員 Redundancy	

^ 若此欄留空，將採用僱員終止服務通知書內所提供的資料作為最後受僱日期及/或終止服務原因。如本表格與僱員終止服務通知書之間的資料存在任何差異或分歧，則以本表格中的資料為準。 If the field is left blank, the information provided on the Notice of Termination of Employment will be taken. If there is any inconsistency or discrepancy between this form and the Notice of Termination of Employment, the information on this form shall prevail.

(II) 確認長期服務金/遣散費收款證明 ACKNOWLEDGE RECEIPT OF LONG SERVICE PAYMENT/SEVERANCE PAYMENT

本人 陳大文，香港身份證/護照號碼\* A132456(7) 已收到上或前任僱主所支付長期服務金/遣散費\* 港幣 2000 元<sup>1</sup>，特此証明。

本人簽署此收款證明書以允許中銀保誠信託由本人/離世成員\*之累積權益中提款僱主供款部份，用以支付前任僱主已計算及全數支付之有關長期服務金/遣散費款項\*。

本人明白當中銀保誠信託支付款項後，將不再為本人/離世成員之申索人\*承擔任何責任及約束。

本人聲明，本人深知和確信本證明書所提供的資料屬正確無訛且並無缺漏。

I, Chan Tai Man, HKID/Passport No.\* A132456(7) hereby acknowledge receipt of payment from the subject Employer in the amount of HK\$<sup>2</sup> 2000 for Long Service Payment/Severance Payment\*.

By signing this Receipt, I give my consent to the BOCPT to make the payment to the subject Employer from the value of that portion of my / the deceased member's accrued benefits\* deriving from the subject Employer's contributions, in relation to the period for which the Long Service Payment/Severance Payment\* has been calculated and fully paid.

I understand that the BOCPT, in so acting, shall be released from any further liabilities and obligations to me / the claimant of the deceased member\* in respect of the above payment.

I declare that to the best of my knowledge and belief, the information given in this Receipt is true and accurate in all aspects.

收款人簽署 Signature of Payee



日期 Date: 29/12/2023

<sup>1</sup> 如申索人為離世成員之親屬或遺產代理人，請一併遞交下列文件副本：離世成員之死亡證、申索人之身份證、已故僱員的家屬申請長期服務金通知書、已故僱員與家屬關係的證明文件(如結婚證書、出世紙)及遺產承辦處發出的遺囑認證書或遺產管理書(如有)。 If the claimant is a relative or a personal representative of the deceased member, please attach a copy of following documents: death certificate, claimant's HKID card, Application for Long Service Payment by Family Members of the Deceased Employee, documentary proof of family relationship between the claimant and the deceased member (e.g. marriage certificate, birth certificate) and the Letter of Probate or Letters of Administration granted by the Probate Registry (if any).

<sup>2</sup> 有關長期服務金/遣散費的抵銷金額將不會超過有關僱傭條例所訂明的最高限額。 The offsetting LSPSP amount would not be exceeded the prescribed maximum amount in accordance with the relevant Employment Ordinance.

For Official Use Only 公司專用				
Input by:		Date:	Verified by:	Date:

2.7 **Payment Methods**

Employers should attach the completed “Remittance Statement” and contribution payment to *BOCPT* via one of the following methods. **(Post-dated cheque will not be accepted for payment of MPF contributions).**

Methods	Description	Cut-off time of receiving remittance statement	Cut-off time of receiving payment
<b>By Mail/ Hand</b>	Send a cheque together with the “Remittance Statement” to <i>BOCPT</i> . The cheque should be made payable to <b>BOCI-Prudential Trustee Limited</b> . Please write your scheme number at the back of the cheque. If you choose to submit by mail, please reserve sufficient documents delivery and processing time (at least 3 working days) to avoid any delay.	Within office hour	Within office hour
<b>By Facsimile/ E-mail</b>	Fax: 2151 0999 / 2530 4786 ; Email: <a href="mailto:mpf@bocpt.com">mpf@bocpt.com</a>	23:59 (within the day)	Not applicable
<b>Via Internet Bank</b>	If client is a Corporate Banking Service Online customer of BOCHK / Nanyang Commercial Bank Limited / Chiyu Banking Corporation, you may access CBS Online to select “Bill Payment”. Then select “Insurance Or Pension Services” from the “Merchant Category” and select “My Choice Mandatory Provident Fund Scheme”. Please input the needed information, Payment Amount and your “11-digit MPF Scheme Number” (e.g. 30001234568) for processing.	Not applicable	Cut-off time of bank’s bill payment
<b>Visit Bank Branches</b>	Client may pay over the counter with the Bank-in slip at any branches of Bank of China (Hong Kong), Chiyu Banking Corporation Limited and Nanyang Commercial Bank Limited*. Please provide the precise “11-digit MPF Scheme Number” (e.g 30001234568) and process cash, cheque or transfer payment. Client may also submit the remittance statement at <b>designated MPF document receiving branches</b> . Bank Account Name: BOCI-Prudential Trustee Limited Bank Account Number: 012-875-00434623 (BOCHK) 043-472-00495233 (Nanyang) 039-730-0-500686-1 (Chiyu)	Within bank’s office hour (If direct deposit by cheque, please note the specific cut-off time of each bank branch)	Within bank’s office hour (If direct deposit by cheque, please note the specific cut-off time of each bank branch)
<b>Via Cheque Deposit Machine</b>	Client may also deposit the cheque at any cheque deposit machines of Bank of China (Hong Kong), Nanyang Commercial Bank Limited and Chiyu Banking Corporation Limited.	Not applicable	Cut-off time of cheque deposit machine
<b>e-Cheque</b>	Submit e-Cheque via MPF (Employer) Account on Trustee’s website, BOCHK e-Cheque Drop Box or other channel (Please refer to the e-Cheque User Guide for more information <a href="http://www.bocpt.com/english/eCheque_Service_User_Guide_eng.pdf">http://www.bocpt.com/english/eCheque_Service_User_Guide_eng.pdf</a> )  Please enter your MPF scheme No. in the Remarks column.	Not applicable	16:30 each business day (specific cut-off time of e-Cheque Deposit/ Drop Box service provided by each bank may vary)
<b>Auto-Pay</b>	Complete and return the “Direct Debit Authorization” 《 <i>MY ER DDA</i> 》 (name of the debit account holder must be the same as the participating employer) to <i>BOCPT</i> . It normally takes around 4 to 6 weeks to set up the direct debit arrangement. Employers are advised to pay the MPF contribution either by cheque or deposit over the bank counter unless receipt of a written confirmation from <i>BOCPT</i> (not served by the banker). The debit amount will be based on the amount as stated in the submitted Remittance Statement for each contribution period or upon confirmation with Employers.  Employers should notify <i>BOCPT</i> in writing in the event of any changes to the direct debit arrangement.	Depends on which of the above methods employer adopts to submit the remittance statement	Within office hour

**Notes for Completion of “Direct Debit Authorization Form”:-**

1. Fill in the debit account details: Bank Name, Bank account no., Bank account registered name/Bank account holders' name (***Employers must be the bank account holders***), Bank account holder's HKID no./Passport no./Business Registration no./Certificate of Incorporation no.
2. Fill in the “Name of Debtor” and “Debtor's Reference-Scheme No.” (11-digit of the scheme number).
3. Sign the form by the same signatory(ies) of the designated debit bank account.
4. Sign on the amendment or alternation, if any.

Sample of "Direct Debit Authorization"



樣本 SAMPLE

MY ER DDA

直接付款授權書 Direct Debit Authorization

請依次填寫並將此授權書交給中銀國際英國保誠信託有限公司。 Please complete and return this form to BOCI-Prudential Trustee Limited.

收款人(受益人)姓名 Name of Party to be credited (the Beneficiary) BOCI-Prudential Trustee Limited - My Choice - Autopay - In A/C	銀行編號 Bank Code 0   1   2	分行編號 Branch Code 8   7   5	收款賬戶之號碼 Account No. to be credited 0   0   4   3   4   1   6   0
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本人/吾等現授權本人/吾等之下述銀行，(根據受益人及/或代理人不時給予本人/吾等銀行之指示)自本人/吾等之賬戶內轉賬至上述賬戶。

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/吾等願共同及個別承擔全部責任。

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。

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工作天之前交予本人/吾等之銀行。

I/We hereby authorize my/our below named Bank to effect transfers from my/our account to the above account in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker's correspondent from time to time.

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.

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 working days prior to the date on which such cancellation/variation is to take effect.

請用英文正楷填寫 TO BE COMPLETED IN ENGLISH AND BLOCK LETTERS

本人/吾等之銀行及分行之名稱 My/Our Bank Name and Branch <b>銀行及分行名稱 Bank name and Branch</b>	本人之銀行賬戶號碼 (銀行編號 (3 位數字) + 分行編號 (3 位數字) + 賬戶號碼) My Bank Account No. [Bank Code (3 digits) + Branch Code (3 digits) + Account No.] 0   1   2   3   4   5   6   7   8   9   0   1   2   3
本人/吾等在結單/存摺上所紀錄之名稱 My/Our Name(s) as recorded on Statement/Passbook <b>ABC Company Limited</b>	
債務人名稱 - 僱主 Name of Debtor - Employer <b>ABC Company Limited</b>	債務人參考 - 計劃編號 (必須填寫) Debtor's Reference - Scheme No. (Compulsory Field) <b>3</b>
*香港身份證/護照/商業牌照/公司註冊號碼 *HK ID Card / Passport / BR / Certificate of Incorporation No. <b>1234678-000</b>	聯絡電話 Telephone No. <b>98765432</b> 本人/吾等在結單/存摺上所紀錄之地址 My/Our Address as recorded on Statement/Passbook <b>Flat 1, 2/F, ABC Building, XXX Street, TST, Kowloon</b>
<p>每次付款限額 Limit per payment</p> <p>閣下可設定每次的轉賬限額。因閣下每次須付款的金額可能不同，為避免轉賬被銀行撤回而延誤供款，我們建議閣下毋須設定限額。如未有說明限額，付款銀行會將限額設定為“不設上限”。 As the amount of each debit may vary, you are not recommended to set the limit to avoid any unaccepted autopay that leads to delay in contribution settlement. If limit is not specified, the debtor's bank will set it as "unlimited".</p>	
<p>此欄只適用於參與僱主 Applicable for participating employer only</p> <p>本人/吾等選擇於每次完成直接付款指示後以下列一種途徑收取供款收據: I/We choose one of the following means for receiving contribution receipt after completing each direct debit transaction:-</p> <p><input type="checkbox"/> 經傳真號碼 Send a contribution receipt to me/us via my/our facsimile number at _____</p> <p><input checked="" type="checkbox"/> 經電子郵箱 Send a contribution receipt to me/us via my/our email at <b>ABCCOMPANY@XXXmail.com</b></p> <p><input type="checkbox"/> 經信函郵遞至本人/我們之通訊地址。 Send a contribution receipt to me/us at my/our correspondence address.</p>	

\*請刪除不適用者。 Please delete whichever is inappropriate.

# 本人/吾等之簽名 My/Our Signature(s)

授權簽署及公司印章 (如適用)

Authorized Signature(s) with Company Chop (if applicable)

授權簽署及公司蓋章(如適用) Authorized Signature(s) with Company Chop (if applicable)

日期 Date **01/11/2022**

# 請確保此授權書內之簽名，與銀行賬戶所簽者完全相同。 Please ensure that you sign the form in the usual way that you would sign on your Bank Account.

以下由銀行填寫 For Bank Use Only

簽署核實 Signature(s) Verified

公司專用 For Official Use Only

Input by: \_\_\_\_\_ Date: \_\_\_\_\_ Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

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  
電郵 E-mail: mpf@bcopt.com

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



## **2.8 Change of Particulars – Employer**

Employers should notify any changes of business names by submitting the following documents to *BOCPT* within 30 days after the changes:-

- (i) “Notice of Change of Employer’s Particulars/ Contribution Method” 《*MY ER CHG*》 .
- (ii) Copy of Business Registration Certificate showing the new name of your Company or any other proof of official registration documents, such as Certificate of Incorporation for the Change of Name.

Upon receipt of the above documents, *BOCPT* will file the registration of your new name on your behalf to the MPFA.

Apart from the change of your business name, Employers should also notify *BOCPT* any changes of Employer’s particulars (*such as address, telephone/fax number, contact person, authorised signature(s) and/or payroll frequency*) by completing and submitting the Notice to *BOCPT* within 30 days after the effective date of changes. For any changes of the authorised signature of your company, Employers should provide *BOCPT* the Notice of Authorized Signatories for Employers.

Employers please note that 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 status and/or Automatic Exchange of Financial Account Information about controlling person(s).



Sample of “Notice of Change of Employer’s Particulars / Contribution Method”



更改僱主資料 / 供款方法通知書  
Notice of Change of Employer’s Particulars / Contribution Method

MY ER CHG

注意 Note:

1. 請以英文正楷填寫。 Please complete in BLOCK LETTERS.
2. \*請刪除不適用者。 \* Please delete whichever is inappropriate.
3. 請於適當位置加上✓號。 Please ✓ the appropriate box.
4. 如實體的稅務居民身分及/或控制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).

(I) 僱主資料及生效日期 EMPLOYER DETAILS & EFFECTIVE DATE OF CHANGES

參與計劃編號 Participating Scheme No. 30012345678	僱主名稱 Name of Employer ABC Company Limited	生效日期 Effective Date of Changes 01/04/2020 日 DD/月 MM / 年 YYYY
---	--	--

(II) 資料更改詳情 PARTICULARS OF CHANGE(S)

<input type="checkbox"/> <b>更改通訊地址 Change of Correspondence Address</b> 室 Flat/Room    樓 Floor    座 Block    大廈/屋邨名稱 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"/> <b>更改註冊地址 Change of Registered Address</b> <i>(請提供有效的商業登記證書/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.)</i> 室 Flat/Room    樓 Floor    座 Block    大廈/屋邨名稱 Name of Building/Estate 門牌號碼 Street No.    街道名稱 Name of Street    註冊地點 Place of Incorporation 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"/> <b>更改現時營業地址 Change of Current Business Address</b> <i>(請提供有效的商業登記證書/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.)</i> 室 Flat/Room    樓 Floor    座 Block    大廈/屋邨名稱 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"/> <b>更改*業務名稱/公司法定名稱 Change of * Business Name / Company Legal Name</b> <i>(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.)</i> 新*業務名稱 / 公司法定名稱: New * Business Name / Company Legal Name: _____ 登記號碼 Registration No.: _____ 注意：若貴公司為有限公司或合夥經營公司，本表格之授權簽署人必須為公司董事/合夥人。其他類別的公司，請由擁有人/主席簽署本表格。 Note: For limited company or partnership, the authorized signatories of this form MUST be the company directors/partners. For other types of entity, please sign by owner/chairman on this form.		
<input type="checkbox"/> <b>更改僱主聯絡詳情 Change of Employer Contact Details</b> 新聯絡人名稱 Name of New Contact Person: _____    新聯絡人職銜 Title of New Contact Person: _____ 新電郵地址 New Email Address: _____    新傳真號碼 New Fax No.: _____ 新辦公室電話號碼 New Business Phone No.: _____    新本地流動電話號碼 New Local Mobile No. (852)		

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  
電郵 E-mail: mpf@bocpt.com

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



(III) 更改供款方法/方式 CHANGE OF CONTRIBUTION METHOD/ FREQUENCY

<input type="checkbox"/> <b>更改供款方式 Change of Contribution Frequency</b> 僱員組別 Employee Group: <input type="checkbox"/> 所有僱員 All <input type="checkbox"/> 就指定僱員, 請註明 In respect of specified employees, please specify _____ 供款方式 Contribution Frequency: <input type="checkbox"/> 每月 Monthly <input type="checkbox"/> 每半個月 Semi-Monthly <input type="checkbox"/> 其他, 請註明 Others, please specify _____ <input type="checkbox"/> 薪金週期 Payroll Covering Period: 由每月 _____ 日至*該月/下一個月 _____ 日 From _____ day of the month to _____ day of the * that / following month
<input checked="" type="checkbox"/> <b>更改付款方式 Change of Payment Method</b> <input checked="" type="checkbox"/> 自動轉賬 Autopay (請填妥直接付款授權書 Please complete Direct Debit Authorization Form) <input type="checkbox"/> Cheque 支票

(IV) 個人資料收集聲明 PERSONAL DATA COLLECTION STATEMENT

我的強積金計劃(「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、累積權益、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。提供個人資料屬自願性質, 唯未能向受託人提供所需資料, 可能導致受託人不能處理有關申請及指示。如受託人或其他服務供應商認為有需要, 他們可在香港特別行政區及以外地區使用、披露及轉移個人資料予有關人士, 包括但不限於任何司法管轄區的監管機構和政府機關, 以及受託人的母公司、聯營公司及其他集團成員, 以便向參與僱主提供有關本計劃的服務或任何與本計劃直接有關的用途, 及/或核對該名參與僱主的其他個人資料。參與僱主有權查閱及更正任何其個人資料, 或要求不得將其個人資料作直接促銷用途。如有此需要, 請致函香港銅鑼灣威非路道 18 號萬國寶通中心 12 字樓, 向中銀國際英國保誠信託有限公司資料保障主任提出。

Personal data provided by participating employers of My 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. The provision of personal data is voluntary, but failure to provide the information required may result in the Trustee being unable to process the application and instructions. These information may be used, disclosed and transferred (in and outside the Hong Kong Special Administrative Region) to such persons as the Trustee or any service providers may be considered necessary, including but not limited to regulators and government authorities in any jurisdiction and any parent and affiliated companies and other group companies of the Trustee for the purpose in connection with the services of the Scheme and any purposes directly related to the Scheme and/or in connection with data matching with other personal data concerning the relevant participating employer. Participating employers have a right to access to and correct any personal data or to request that personal data about them not be used for direct marketing purposes. Such request should be in writing to the Data Protection Officer of BOCI-Prudential Trustee Limited at 12/F, Citicorp Centre, 18 Whitfield Road, Causeway Bay, Hong Kong.

如閣下不欲個人資料用作上述直接促銷用途, 請在方格內填上劃號(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 MPFORSO schemes (including all our other MPFORSO schemes and/or any further accounts set up in the future)).

(V) 聲明及簽署 DECLARATION AND SIGNATURE

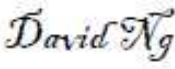

(1) 我們以簽署此通知書作為聲明此通知書內所提供之資料為真實及正確。  
We declare that all information given in this Notice is true and correct by signing of this Notice.

(2) 我們確認已閱讀、明白及同意(IV)部內的個人資料收集聲明。  
We confirm that we have read, understood and agreed to the Personal Data Collection Statement in Part (IV).

(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)。  
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) 我們承諾, 如實體的稅務居民身分及/或控制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。  
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).

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

日期 Date (日 DD/月 MM/年 YYYY): 01/04/2020

公司專用 For Official Use Only			
Input by :	Date :	Verified by :	Date :

**2.9 Notice of Addition/Change of Employer's Standard Voluntary Contribution**

Employers may change the amount or percentage of the employer voluntary contributions once a year, provided that:-

- (i) all the relevant employees have been served a 3 month's prior notice; and
- (ii) submit a "Notice of Addition / Change of Employer's Standard Voluntary Contributions" 《MY ER CHG VC》 to *BOCPT* at least 3 months prior to the effective date. The notice should be signed by the authorised signature of your company with company chop. Please also sign on the alteration or amendment, if any.

A written employee's consent should be obtained in advance if there is any reduction of employee's accrued benefits (such as set back of the vesting scale, extend the non-statutory retirement age etc).

Sample of "Notice of Addition / Change of Employer's Standard Voluntary Contributions"

**新增 / 更改僱主標準自願性供款通知書**  
Notice of Addition / Change of Employer's Standard Voluntary Contributions

MY ER CHG VC

**注意 Note:**

- 請注意，任何對強制性供款或自願性供款有關之修改，將會損害成員在該項計劃下的既有利益或累積權益，如該項修改須在獲得強制性公積金計劃管理局的批准後方可生效。 Please note that any changes relating to Mandatory Contribution or Voluntary Contribution that would have detrimental effect on a member's vested benefits or accrued rights under a restricted scheme would require approval from the Mandatory Provident Fund Schemes Authority before the change can take effect.
- 請以英文正楷填寫。 Please complete in BLOCK LETTERS.
- 此表格須於生效日期前 3 個月送交公司。 This form should be delivered to the Trustee at least 3 months prior to its effective date.
- 自願性供款須按每一計劃週年度可更改一次。 Voluntary Contribution may only be changed once in each Scheme financial year.
- 請根據本表格，或與僱主每年一次自願性供款（由僱主為其作出的自願性供款），填妥遞交「新增 / 更改僱主標準自願性供款通知書」。由僱主提供自願性供款之憑證或證明書，並與僱員將被更改之供款通知或投資策略表，填妥後交與僱員一個現成及設有收據上印的預備金投資方案，並附有按年自願性供款之投資策略之特點。成分基金及現成投資策略詳情請參閱有關文件，該等文件可與僱主或中銀國際客戶服務中心索取，亦可於本公司網站 <http://www.hocpf.com> 下載。 Please remind your employees that, prior to making the first voluntary contribution made by you in respect of each member, employees members are required to submit the investment mandate in respect of the voluntary contribution by submitting the "Notice of Addition / Change of Member's Voluntary Contribution" to the Trustee. Otherwise, the member will be considered to have elected to invest such contribution according to default investment strategy ("DIS"). DIS is a steady state MPF investment strategy with low caps, and also contains an automatic de-risking feature. Details of the constituent fund and DIS, please refer to the offering documents which are available upon request from MPF administrators or at the Customer Service Centre. It can also be downloaded from website at <http://www.hocpf.com>.

**(I) 僱主資料及生效日期 EMPLOYER DETAILS & EFFECTIVE DATE OF CHANGE**

計劃編號 Scheme No. (公司專用 Official use only) 30012345678	有關僱主名稱 Name of relevant employer ABC Company Limited	生效日期 Effective Date of Changes 01/04/2020 日 DD / 月 MM / 年 YYYY
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**(II) 新增 / 更改自願性供款資料 DETAILS OF ADDITION / CHANGE OF VOLUNTARY CONTRIBUTION**

本公司之自願性供款作以下修正 We change our instruction of making Voluntary Contribution as follows - (請於適用者加上 "✓" 號 Please tick whichever is appropriate)

新增 ADDITION     更改 CHANGE     停止 STOP    \*我們刪去上項 (1) 項生效日期前所提交之自願性供款  
We will STOP MAKING voluntary contribution on and after the effective date as specified in Part (I) above.

(i) 自願性供款基準 Basis of Voluntary Contribution

- 有關入息 x 供款比率 Relevant Income x Contribution Rate
- (有關入息 x 供款比率) - 強制性供款金額 (Relevant Income x Contribution Rate) - Mandatory Contribution Amount
- (有關入息 - 法定有關入息上限) x 供款比率 (Relevant Income - Statutory Maximum Level of Relevant Income for Mandatory Contribution) x Contribution Rate
- 基本薪金 x 供款比率 Basic Salary x Contribution Rate
- (基本薪金 x 供款比率) - 強制性供款金額 (Basic Salary x Contribution Rate) - Mandatory Contribution Amount
- (基本薪金 - 法定有關入息上限) x 供款比率 (Basic Salary - Statutory Maximum Level of Relevant Income for Mandatory Contribution) x Contribution Rate
- 每一供款期之固定金額 A fixed amount in each contribution period 僱主供款 Employer's Contribution \$

(ii) 成員類別 Member Category

<input type="checkbox"/> 全部僱員成員 All Employee Members	僱主供款百分比 Employer's Contribution Rate %	歸屬比例選擇 (請參閱以下第(ii)(b)部份) Vesting Scale Option (Please refer to Part(ii)(b) below)
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
<input type="checkbox"/> 自訂比率 Customized scales (以僱員類別或服務年數為基礎計算 based on categories of employee or Year(s) of Service)		
僱員成員類別 Categories of Employee Members	服務年數 Year(s) of Service	僱主供款百分比 Employer's Contribution Rate %
		歸屬比例選擇 (請參閱以下第(ii)(b)部份) Vesting Scale Option (Please refer to Part(ii)(b) below)
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C

(iii) 僱主自願性供款之歸屬比例 Benefit Vesting Scale in respect of Employer's Voluntary Contribution

a) 利益歸屬是按下列基礎計算服務年數 Length of service for vesting of benefits should be based on :

- 完成參與計劃會籍年期 Completed Year(s) of Membership in the Participating Scheme
- 完成為僱主服務年期 Completed Year(s) of Service with Employer
- 其他，請註明 Other, please specify :

b) 歸屬比例選擇 Vesting Scale Option :

選擇 Option	完成年期 Completed Years	僱主自願性供款百分比 Employer's Voluntary Contribution Rate %										
		<1	1	2	3	4	5	6	7	8	9	10
選擇 Option A	0	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%	100%
選擇 Option B	0	0	0	30%	40%	50%	60%	70%	80%	90%	100%	100%
選擇 Option C												

(iv) 僱員退休年齡 Retirement Age for all Employees

- 非法定正常退休年齡 Non-Statutory Normal Retirement Age \_\_\_\_\_ 及 \_\_\_\_\_ 服務年數。  
Non-Statutory Early Retirement Age \_\_\_\_\_ with \_\_\_\_\_ Years of Service.
- 非法定正常 / 提早退休年齡利益歸屬比例 Benefits Vesting on non-statutory normal/early retirement age:
- 100%
- 比例與截止服務年數相同並列明於 (ii) 部 (a) 及 (b) 部份。 Same percentage as termination of employment as indicated in Part (II) (ii) and (iii) as above.

註：僱主自願性供款所訂的僱員退休年齡可與強制性供款所訂的有所不同。  
Remarks: The retirement age for Employer's Voluntary Contributions can be different from that which applies to Mandatory Contributions.

**(III) 聲明及簽署 DECLARATION AND SIGNATURE**

1. 我們確認如僱員成員之累積權益因歸屬比例調整而有所減少時，我們與得對此影響之僱員成員書面同意，否則不能作出有關更改。 We confirm that if a change in the vesting scale will result in a reduction of the Employee Member's accrued benefits, we shall not be allowed to effect such a change until the prior written consent of the Employee Member concerned has been obtained.

2. 我們確認以上更改已於三個月前書面通知計劃下的有關僱員成員。 We confirm that we have notified the relevant Employee Member(s) with 3 months' prior written notices of the above changes.

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

日期 Date : 01/04/2020

公司專用 For Official Use Only

Input by :	Date :	Verified by :	Date :
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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  
電郵 E-mail : mpf@bcot.com

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



### **SECTION 3 Information for Employee Member**

*BOCPT* offers several convenient ways for members to manage their MPF accounts. Members can obtain account balance, unit price and different forms via Internet, ATM service, Interactive Voice Response System Services and iPhone, iPad or Android App. Alternatively, members can simply call our Customer Service Hotlines at 2929-3366 for any assistance on MPF matters.

#### **3.1 Notice of Change of Scheme Member's Particulars**

In order to maintain an up-to-date member's record for communication purpose, Employers must assist and remind their employees to notify *BOCPT* of any changes in personal particulars, (*such as name, correspondence address, contact telephone/fax number etc*) by submitting a "Notice of Change of Scheme Member's Particulars" 《*MY EE CHG*》 to *BOCPT* within 30 days from the effective date of changes.

An account holder must notify the Trustee and provide an updated Self-Certification form within 30 days if there is any change in circumstances relating to your status of tax residency(ies).

The signature should be the same as that on the member enrolment form for our verification.

Sample of "Notice of Change of Scheme Member's Particulars"



計劃成員資料更改表 Notice of Change of Scheme Member's Particulars

MY EE CHG

注意 Note:

- 請以正楷填寫。Please complete in BLOCK LETTERS.
- 請於適當位置加上"✓"號。Please ✓ the appropriate box.
- 如賬戶持有人的稅務居住地位有任何改變，閣下必須在改變後的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 account holder must notify the Trustee and provide an updated Self-Certification form within 30 days if there is any change in circumstances relating to your status of tax residency(ies).

(I) 成員資料及更改資料生效日期 MEMBER'S DETAILS & EFFECTIVE DATE OF CHANGES

計劃編號 Scheme No.	30012345678		
成員姓名 Member Full Name (必須與香港身份證/護照相同 as shown on HKID/Passport)	中文 Chinese	先生/女士 陳大文	
	英文姓氏 English Surname	Mr/Ms	Chan
	英文名字 English Given Name	Tai Man	
<input checked="" type="checkbox"/> 香港身份證 HKID No. <input type="checkbox"/> 護照號碼 Passport No.	A123456(7)		
僱主名稱 Name of Employer (如適用 If applicable)	ABC Company Limited		
成員類別 Type of member	<input checked="" type="checkbox"/> 僱員成員 Employee Member <input type="checkbox"/> 自僱成員 SEP Member <input type="checkbox"/> 個人賬戶成員 Personal Account Member		<input type="checkbox"/> 特別自願性供款成員 SVC Member <input type="checkbox"/> 可扣稅自願性供款成員 TVC Member
			生效日期 Effective Date of Changes 01/04/2020 日 DD/月 MM/年 YYYY

(II) 更改個人資料 CHANGE OF PERSONAL PARTICULARS

<input type="checkbox"/> 成員姓名 Member Name <sup>8</sup> (須提供有關法定證明文件 Must provide copy of a statutory document(s))		
中文 Chinese	英文姓氏 English Surname	英文名字 English Given Name
<input type="checkbox"/> 先生/女士	<input type="checkbox"/> Mr/Ms	
<input type="checkbox"/> 香港身份證號碼 HKID No. <sup>8</sup>		<input type="checkbox"/> 出生日期 Date of Birth <sup>8</sup> (須提供有關法定證明文件 Must provide copy of a statutory document(s))
<input type="checkbox"/> 護照號碼 Passport No. <sup>8</sup>		
		日 DD/月 MM/年 YYYY
請注意：如閣下現正投資於預設投資策略，更改出生日期可能令閣下的預設投資策略組合受到影響。Please note that changing the date of birth may have an impact on your Default Investment Strategy (DIS) portfolio if you are investing in the DIS.		
<input type="checkbox"/> 國籍(國家/地區) Nationality (Country/ Region) (只適用於自僱成員/個人賬戶成員/特別自願性供款成員/可扣稅自願性供款成員 Only applicable to SEP Member/Personal Account Member/SVC Member/TVC Member)		
<input type="checkbox"/> 新增 Add                      1. _____                      2. _____		
<input type="checkbox"/> 更改                      由 _____                      更改至 _____		
Change                      Change from _____                      to _____		
以下資料更改只適用於自僱人士 The following changes will only make applicable to SEP member.		
<input type="checkbox"/> 傳真號碼 Fax No (只適用於自僱成員 Only applicable to SEP Member)		
<input type="checkbox"/> 供款方式 Contribution Frequency (只適用於自僱成員 Only applicable to SEP Member)		
<input type="checkbox"/> 年供 Yearly <input type="checkbox"/> 月供 Monthly		
<input type="checkbox"/> 付款方法 Payment Method (只適用於自僱成員 Only applicable to SEP Member)		
<input type="checkbox"/> 自動轉賬 Autopay (請遞交「直接付款授權書」 Please submit "Direct Debit Authorization Form") <input type="checkbox"/> 支票 Cheque (請遞交「取消直接付款通知書」 Please submit "Direct Debit Request Cancellation Form")		

<sup>8</sup> 若更改姓名、香港身份證/護照號碼或出生日期，須提供有關法定證明文件。如成員只提供出生年份及月份，受託人將以出生月份的最後一天作為成員的出生日期；如成員只提供出生年份，受託人將以出生年份的最後一天作為成員的出生日期。請附號碼備供沒有香港身份證的成員填寫。  
Must provide copy of statutory document(s) for proofing any changes of name, HKID/Passport No. or date of birth. If member only provides the year and month of birth, the trustee will use the last day of the month as the birthday of the member, and where if the member only provides the year of birth, the trustee will use the last day of the year as the birthday of the scheme member. Passport No. ONLY applicable to member without HKID.

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(II) 更改個人資料(續) CHANGE OF PERSONAL PARTICULARS (CONTINUED)

以下所有聯絡資料，將自動適用於閣下以同一香港身份證/護照號碼登記於我的強積金計劃（本計劃）的所有賬戶。  
All the below contact information will automatically apply to ALL your accounts maintained under the same HKID/Passport number registered under My Choice Mandatory Provident Fund Scheme (the "Scheme").

<input type="checkbox"/> 現時住宅地址 Current Residential Address (恕不接受郵政信箱 P.O. Box will not be accepted)	室 Flat/Room      樓 Floor      座 Block      大廈/屋宇名稱 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      只適用於香港以外地址 Applicable to address outside HK only <input type="checkbox"/> 九龍 KLN      城市 City      國際地區 Country/ Region <input type="checkbox"/> 新界 NT	
	請指示上述改變將適用於 Please indicate the above change will be applied to: <input type="checkbox"/> 現時住宅地址 Current Residential Address <input type="checkbox"/> 通訊地址 Correspondence Address <input type="checkbox"/> 上述兩者皆是 Both of the above	
<input type="checkbox"/> 通訊地址 Correspondence Address (如與住宅地址不同 If different from Residential Address)	如與上述住宅地址不同，才須填寫此部分 Please complete this part if different from above Residential Address 室 Flat/Room      樓 Floor      座 Block      大廈/屋宇名稱 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      只適用於香港以外地址 Applicable to address outside HK only <input type="checkbox"/> 九龍 KLN      城市 City      國際地區 Country/ Region <input type="checkbox"/> 新界 NT	
	請提供至少一個本地手提電話號碼及電郵地址，以便日後收取本公司電子服務驗證碼及方便聯絡閣下。 Please provide at least one local mobile phone no. and email address to receive the verification code for using our electronic services and remain in contact with us.	
<input checked="" type="checkbox"/> 本地流動電話號碼 Local Mobile Phone No. (852) 9000 000	<input type="checkbox"/> 住宅電話號碼 Residential Phone No. (852)	<input type="checkbox"/> 香港以外電話號碼 Phone No. outside HK (      )-(      )- 國家編號 Country Code      地區編號 Area Code
<input type="checkbox"/> 電郵地址 Email Address		
<input type="checkbox"/> 更改成員簽名式樣* Change of Member's Specimen Signature* * 本人此後將使用新的簽名式樣簽署任何與本計劃有關之文件、書信及其他書面指示，由生效日期起直至本人另行通知為止。此簽名式樣將取替以往的簽名式樣。 * I, hereby adopt the new specimen signature to sign any documents, correspondences & written instructions with regard to the Scheme in future, which shall remain valid until further notification is given. This signing arrangement will supersede the previous specimen signature submitted by me. 以往的簽名式樣必須與之前遞交至中銀國際英國保誠信託有限公司的式樣相同。如閣下尚未提供或忘記以往的簽名式樣，請同時提供香港身份證護照副本，並於該副本上簽署新的簽名式樣並註明“僅供身份確認及更新本人資料之用”。 Previous specimen signature must be the same as the latest one submitted to BOCI-Prudential Trustee Limited. If you have not yet provided or forget your previous signature, please also provide a copy of your HKID / Passport with your new specimen signature, and mark "For the purposes of identification & updating my particulars only".		
以往的簽名式樣 Previous Specimen Signature	新的簽名式樣 New Specimen Signature	

## (III) 中銀保誠信託收集個人資料聲明

## BOCPT PERSONAL INFORMATION COLLECTION STATEMENT ("BOCPT PICS")

申請人／成員明白及同意中銀保誠英國保誠信託有限公司（「中銀保誠信託」）可將收集的任何個人資料（不論從本申請表或以其他途徑收集）作以下用途： Applicant / Member(s) understand(s) and consent(s) that, any personal data collected by BOCI-Prudential Trustee Limited ("BOCPT") (whether collected in this application form or otherwise) may be used by BOCPT for the following purposes:

- (i) 處理、管理、實施及執行本文件或任何其他申請人／成員可能不時提交給中銀保誠信託的文件或文件中涉及的要求或交易； Processing, administering, implementing and effecting the requests or transactions contemplated in this document or any other documents applicant / member(s) may submit to BOCPT from time to time;
- (ii) 中銀保誠信託的新產品設計或提升現有產品及服務； Designing new or enhancing existing products and services provided by BOCPT;
- (iii) 進行客戶調查； Conducting customer surveys;
- (iv) 為申請人／成員甄選及參與獎賞、忠誠或特權計劃及相關服務； Selecting and participating in reward, loyalty or privileges program and related service for applicant / member(s);
- (v) 與申請人／成員進行通訊，包括向申請人／成員發送可與中銀保誠信託有關任何申請人／成員帳戶的行政通訊或有關未來收集個人資料聲明的變更； Communicating with applicant / member(s) including to send applicant / member(s) administrative communications about any account applicant / member(s) may have with BOCPT or about future changes to this PICS;
- (vi) 與上述任何一項直接相關的其他目的； Other purposes directly relating to any of the above;
- (vii) 遵守適用的法律、法規或法院命令。 Complying with applicable laws, regulation or court order.

中銀保誠信託也可使用申請人／成員的聯絡資料、人口統計資料、投資選擇及累積權益、就有關計劃的產品的推廣資訊，包括電話、郵件、電子郵件、電話短訊或任何電子信息等方法聯絡申請人／成員。除非得到申請人／成員同意（包括表示不反對），否則中銀保誠信託不可使用申請人／成員資料為該用途。如果申請人／成員不同意接收該等推廣資訊，請在本表格的「IV 部分 - 聲明及簽署」下的適當方格中填上別號。 BOCPT may also use applicant / member(s)' contact details, demographic information, investment choices and accrued benefits to contact applicant / member(s) with marketing information regarding the Scheme, including by phone calls, mail, email, SMS or any type of electronic message. BOCPT may not so use applicant / member(s)' data unless BOCPT has received applicant / member(s)' consent (which includes an indication of no objection). Tick the box in appropriate area under "Part IV - Declaration and Signature" in the form if the applicant / member(s) does not consent to receive such marketing information.

中銀保誠信託所持有申請人／成員的有關個人資料將被保密，但中銀保誠信託可為以下目的披露申請人／成員的個人資料予： Personal data held by BOCPT relating to applicant / member will be kept confidential but BOCPT may disclose member(s)' personal data for the following purposes:

- (a) 申請人／成員的銀行作匯款用途； To applicant / member(s)' bank for payment purposes;
- (b) 申請人／成員的強積金中介人； To applicant / member(s)' MPF intermediaries;
- (c) 中銀保誠信託的關連公司（根據《公司條例》的定義）包括保險公司和金融服務機構； To BOCPT's related companies (as defined in the Companies Ordinance) including insurance companies and financial services companies;
- (d) 任何提供行政管理、數據處理、電信、計算、繳款、收債或證券清算、技術外判、客戶熱線服務中心、郵寄及印刷服務的中介、承包商或第三方服務供應商（不論在中銀保誠信託之內或之外及中銀保誠信託的關連公司）與中銀保誠信託相關公司的業務運作有關的服務，以及向申請人／成員提供的服務； To any agent, contractor or third party service provider (within or outside BOCPT and BOCPT's related companies) who provides administration, data processing, telecommunications, computer, payment, debt collection or securities clearing, technology outsourcing, call center services, mailing and printing services in connection with the operation of the business of BOCPT and BOCPT's related companies and provision of BOCPT services to applicant / member(s);
- (e) 其他協助收集申請人／會員信息或與申請人／成員聯繫的公司，例如研究公司和評級機構，以增強中銀保誠信託向申請人／成員提供的服務； To other companies who help gather applicant / member(s)' information or communicate with applicant / member(s), such as research companies and rating agencies, in order to enhance the services BOCPT provide to applicant / member(s);
- (f) 根據任何法律、法規或法院命令的要求，對中銀香港或其關連公司（在香港境內或境外）有義務向其披露的任何人、該法律、法規或法院命令對中銀香港或其關連公司具有約束力公司（在香港境內或境外）應受監管機構或其他機構發布的任何準則的約束或根據其目的，或受其約束，或根據這些目的的目的，由中銀香港或其關連公司（香港境內或境外）遵守； To any person to whom BOCPT or its related companies (inside or outside Hong Kong) is under an obligation to make disclosure under the requirements of any law, regulation or court order binding on or applying to or to which BOCPT or its related companies (inside or outside Hong Kong) is subject to, or under and for the purposes of any guidelines issued by regulatory or other authorities with which BOCPT or its related companies (inside or outside Hong Kong) is expected to comply;
- (g) 有關僱主；及 Relevant employer(s); and
- (h) 按法例要求或准許的其他人士。 As otherwise required or permitted by law.

中銀保誠信託也可就法例准許或於獲得申請人／成員的同意後披露或將申請人／成員的個人資料作其他用途。 BOCPT may also use and disclose member(s)' personal data in other ways with applicant / member(s)' consent or as otherwise required or permitted by law.

申請人／成員明白申請人／成員所提供之個人資料均屬自願，但如未能提供所要求的資料將可能導致中銀保誠信託無法處理申請人／成員的申請。申請人／成員有權要求查閱及更改由中銀保誠信託持有的任何個人資料。如有此需要，請致函香港太古城英皇道 1111 號 15 樓 1507 室，向中銀保誠英國保誠信託有限公司資料保障主任提出。

Applicant / Member(s) understand(s) that the information applicant / member(s) provided is on voluntary basis, but failure to provide the requested personal data may mean BOCPT is unable to process applicant / member(s)' application. Applicant / Member(s) has / have the right to seek access to and request correction of any personal data BOCPT holds by sending a written request to the Data Protection Officer of BOCI-Prudential Trustee Limited at Suite 1507, 15/F, 1111 King's Road, Taikoo Shing, Hong Kong.

中銀保誠信託收集個人資料聲明的修訂：

中銀保誠信託保留權利可隨時且在無須通知的情況下增添、修改、更新或修訂上述收集個人資料聲明，我們備知會閣下有關修改、更新或修訂，倘我們決定修改我們的個人資料政策，我們將於我們的網站或以書面形式知會閣下有關修改，從而讓閣下能得悉我們所收集的資料、我們如何使用該資料及在何種情況下會被披露資料。任何有關修改、更新或修訂將在刊登後即時生效。

Amendments to BOCPT PICS:

BOCPT reserves the right, at any time and without notice, to add to, change, update or modify the above PICS, simply by notifying you of such change, update or modification. If we decide to change our personal data policy, those changes will be notified to you either on our website or in writing so that you are always aware of what information we collect, how we use the information and under what circumstances the information is disclosed. Any such change, update or modification will be effective immediately upon posting.



**(IV) 聲明及簽署 DECLARATION AND SIGNATURE**

- (1) 本人確認此申請表上提供的所有資料均為真實及準確無誤。本人並承諾若提供之資料有任何變更，本人將在合理及切實可行之情況下盡快通知中銀國際英國保誠信託有限公司（「受託人」）。
- I confirm that all the information provided in this application form is true and accurate in all aspects. I further undertake that if there is any change in the information so provided, I shall notify BOCPT Prudential Trustee Limited (the "Trustee") of such change as soon as reasonably practicable.
- (2) 本人明白若本人未能提供此表格所要求之資料，受託人將不能處理本人之申請，本人確認已閱讀、明白及同意(III)部內的中銀保誠信託收集個人資料聲明。
- I acknowledge that failure to provide the data requested in this form may result in the Trustee being unable to process my application. I confirm that I have read, understood and agreed to the BOCPT PICS in Part (III).
- (3) 本人知悉及同意，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稅務管轄區的稅務當局，以作自動交換財務賬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）。
- I acknowledge and agree that the data collected may be transmitted by the Trustee to the Inland Revenue Department which may further exchange such information to the competent authority of another reportable jurisdiction. For the purpose of Automatic Exchange of Financial Account Information ("AEOF") 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) 本人承諾，如本人的稅務居住地相關的情況有所改變，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。
- I undertake to notify the Trustee within 30 days if there is any change in circumstances relating to my status of tax residency(ies) that makes any of the information provided in any parts of the self-certification in this form incorrect or incomplete and provide an updated self-certification form.
- (5) 為了通過自動櫃員機及/或其他渠道，包括但不限於網上銀行、手機銀行、綜合銀行結單及分行網絡等（「銀行服務」）獲得本人的強積金賬戶的最新資料，本人同意並授權受託人將本人的個人資料轉移至以下銀行：
- In order to obtain the latest information of my MPF account via Automatic Teller Machine ("ATM") machine and / or such other channels, including but not limited to internet banking, mobile banking, consolidated bank statement and branch network etc ("Bank Services"), I agree and authorize the Trustee to transfer my personal data to the following banks:
- 中國銀行(香港)有限公司  
Bank of China (Hong Kong) Limited  
南洋商業銀行有限公司  
Nanyang Commercial Bank, Limited  
集友銀行有限公司  
Chi Yu Banking Corporation Limited
- 如果閣下不同意根據中銀保誠信託收集個人資料聲明提供，使用及轉移閣下的個人資料作直接促銷目的，請在左面的方格填上「✓」。如果閣下沒有在方格中填上「✓」，則表示閣下已同意提供，使用和轉移其個人資料作直接促銷目的。
- Please tick the box if you do not agree with the provision, use and transfer of your personal data for direct marketing purposes in accordance with the BOCPT PICS. If you do not tick the box, you are deemed to have given your consent for the provision, use and transfer of your personal data for direct marketing purposes.
- 如果閣下不同意根據中銀保誠信託收集個人資料聲明提供，使用及轉移閣下的個人資料作銀行服務，請在左面的方格填上「✓」。如果閣下沒有在方格中填上「✓」，則表示閣下已同意提供，使用和轉移其個人資料作銀行服務。
- Please tick the box if you do not agree with the provision, use and transfer of your personal data for Bank Services in accordance with the BOCPT PICS. If you do not tick the box, you are deemed to have given your consent for the provision, use and transfer of your personal data for Bank Services.

成員簽署 Signature of Member

 *Chan Tai Man*

日期 Date (日 DD/月 MM/年 YYYY)

公司專用 For Official Use Only			
Input by :	Date :	Verified by :	Date :

**3.2 Notice of Addition / Change of Member's Voluntary Contribution**

Members may change the amount or the percentage of the employee voluntary contributions once a year, provided that such a member has submitted a "Notice of Addition / Change of Member's Voluntary Contributions" 《*MY EE CHG VC*》 to *BOCPT* at least 3 months prior to the effective date. Employers should assist their employees to forward the forms to *BOCPT* upon requested from the employees.

Sample of “Notice of Addition / Change of Member’s Voluntary Contributions”



MY EE CHG VC

**新增 / 更改成員自願性供款通知書**  
**Notice of Addition / Change of Member’s Voluntary Contributions**

注意 Note:

- 請以正楷填寫。  
Please complete in BLOCK LETTERS.
- \*請劃除不適用者。  
\* Please delete whichever is inappropriate.
- 請於適當位置加上“✓”號。  
Please ✓ the appropriate box.
- 於每一計劃年度內只可更改一次自願性供款。  
Voluntary contributions can only be changed once in each Scheme Year.
- 請從(II)、(III)或(IV)部中填寫適用者。  
Please complete Part (II), Part (III) or (IV) whichever is appropriate.
- 中銀國際英國保誠信託有限公司(「受託人」)於收到閣下適當填妥的表格後在合理可行範圍內將盡快處理閣下於(II)、(III)或(IV)部的指示。  
Your instructions indicated in Part (II), Part (III) or (IV) will be processed as soon as reasonably practicable after BOCI-Prudential Trustee Limited (the “Trustee”) receives your duly completed form.

(I) 計劃成員資料 PERSONAL DETAILS OF SCHEME MEMBER

計劃編號 Scheme No. <b>30012345678</b>	成員姓名 (必須與香港身分證號碼相同) Member Name (as shown on HKID card/Passport) 中文 <b>陳大文 *先生/先生</b> English <b>*Mr/Ms Chan Tai Man</b>	
香港身分證/護照號碼 HKID Card/Passport No. <b>A123456(7)</b>	僱主名稱 Name of Employer: <b>ABC Company Limited</b>	
流動電話號碼 Mobile Phone No. <b>9000 0000</b>	住宅電話號碼 Residential Phone No. <b>2000 0000</b>	電郵地址 E-mail Address <b>TMC @abc.com.hk</b>

(II) 新增/更改自願性供款資料 ADDITION / CHANGE OF VOLUNTARY CONTRIBUTION

生效供款期 Effective Contribution Month	<u>01/05/2020</u> 月 MM / 年 YYYY
<input type="checkbox"/> 新增僱主自願性供款 (成員及僱主請分別填寫(IV)部及(V)部「由僱主填寫」部分) Addition of Employer’s Voluntary Contribution (Member and Employer, please complete Part (IV) and “For Employer Use Only” in Part (V) respectively)	
<input checked="" type="checkbox"/> 新增成員自願性供款 (請同時填寫(III)及(IV)部) Addition of Member’s Voluntary Contribution (please also complete Part (III) and Part (IV))	
<input type="checkbox"/> 更改成員自願性供款百分比/金額 (請同時填寫(III)部) Change of Member’s Voluntary Contribution percentage / amount (please also complete Part (III))	
<input type="checkbox"/> 本人現聲明停止作出自願性供款 I am writing to serve you a notice of stop making voluntary contributions	

(III) 自願性供款詳情 VOLUNTARY CONTRIBUTIONS DETAILS

如你擬作自願性供款，請提供以下資料：  
If you wish to make Voluntary Contribution, please provide the following information:

<input type="checkbox"/> 按僱主自願性供款方法為基礎，該百分比為 Refer to the same basis as your employer: <input type="checkbox"/> 3% <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 與僱主百分比相同 Same as employer’s rate
<input checked="" type="checkbox"/> 作出定額自願性供款 Make fixed amount voluntary contribution: <input type="checkbox"/> HK\$ 300 <input type="checkbox"/> HK\$ 500 <input checked="" type="checkbox"/> HK\$ 1000

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  
 電郵 E-mail: mpf@bocpt.com

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



(IV) 投資指示 THE INVESTMENT INSTRUCTION

請指示有關供款的投资分佈。每項已選擇的投资选项分佈必須為整數及不少於 5%，而所有已選擇的投资选项總和必須為 100%，否則閣下的投資指示將被視為無效。閣下不一定需填寫此部分，但如留空此部分，或如閣下的投資指示被視為無效，閣下有關供款將會根據預設投資策略作出投資。預設投資策略是一個現成及設有收費上限的強權全投資方案，並設有按年齡自動降低投資風險的特點。成分基金以及預設投資策略詳情請參閱有關詳情文件。該等文件可向強權金中介人或客戶服務中心索取。亦可於本公司網站 <http://www.hocpt.com> 下載。成員必須注意投資市場可能出現顯著的波動，基金單位價格可跌可升。在作出投資選擇前，閣下必須小心衡量個人可承受風險的程度及財政狀況(包括閣下的退休計劃)。如有任何疑問，請諮詢閣下的獨立財務顧問了解更多詳情。請注意，當閣下有一項或多項特定的指示(包括但不限於贖回或轉換指示)與每年的降低風險同一日處理時，每年的降低風險將會待完成所有特定指示後才執行(如需要)。Please indicate your investment choice. Investment instruction must be an integer with a minimum of 5% per selected investment choice, and the total percentage must be equal to 100%; otherwise your investment instruction will be deemed invalid. This section is optional for you to fill in, but if this section is left blank or if your investment instruction is deemed invalid, your relevant contributions will be invested in accordance with Default Investment Strategy ("DIS"). DIS is a ready-made MPF investment strategy with fee caps, and also contains an automatic de-risking feature. Details of the constituent funds and DIS please refer to the offering documents which are available upon request from MPF intermediaries or at the Customer Service Centre, it can also be downloaded from website at <http://www.hocpt.com>. Members should note that investment markets could fluctuate significantly. Fund prices may go down as well as up. Please carefully consider your own risk tolerance level and financial circumstances (as well as your own retirement plan) before making any investment choices. If in doubt, please contact your independent financial advisor for further details. Please note that when one or more of the specified instructions (including but not limited to redemption or switching instructions) are being processed on the annual date of de-risking for you, the annual de-risking will only take place after completion of these instructions where necessary.

- 閣下可隨時透過以下途徑作出有效的特定投資指示 You may make your valid specific investment instruction through the following channels at any time:
    - (i) 互聯網 Internet
    - (ii) 互動話音系統 Interactive Voice Response System
    - (iii) 智能手機或平板電腦應用程式 Smart phone or tablet apps
    - (iv) 表格 Form
- 注意：如關於本部分作任何修改，請於修改處簽名作實。 Note: Please countersign if any amendment is made in this part.

投資選擇 Investment Choice		自願性供款 Voluntary Contribution	注意：如有修改，請即簽名作實。 Note: Please countersign if an amendment is made.
MyDIS	預設投資策略 Default Investment Strategy	50	
MyGF	我的增長基金 My Choice Growth Fund	50	%
MyBF	我的均衡基金 My Choice Balanced Fund		%
MySF	我的平穩基金 My Choice Stable Fund		%
MyGE	我的環球股票基金 My Choice Global Equity Fund		%
MyAE	我的亞洲股票基金 My Choice Asia Equity Fund		%
MyCE	我的中國股票基金 My Choice China Equity Fund		%
MyHKE	我的香港股票基金 My Choice Hong Kong Equity Fund		%
MyTF	我的香港追蹤指數基金 My Choice Hong Kong Tracking Fund		%
MyGB	我的環球債券基金 My Choice Global Bond Fund		%
MyHB	我的港元債券基金 My Choice HKD Bond Fund		%
MyRMM	我的人民幣及港元貨幣市場基金 My Choice RMB & HKD Money Market Fund		%
MyCPE	我的強權金保守基金 My Choice MPF Conservative Fund		%
MyCAF	我的核心累積基金 My Choice Core Accumulation Fund		%
MA65F	我的 65 歲後基金 My Choice Age 65 Plus Fund		%
總計 TOTAL		100	%

注意：降低風險機制將不適用於獨立選擇的「我的核心累積基金」及/或「我的 65 歲後基金」。  
Note: De-risking mechanism would not apply to standalone My Choice Core Accumulation Fund and/or My Choice Age 65 Plus Fund.

(V) 聲明及簽署 Declaration and Signature

本人現根據上文所述授權僱主由本人的\*基本薪金/有關收入中\*扣除/停止扣除款項作為自願性供款。  
I hereby authorise my employer to \*make / stop making regular deductions from my \*basic salary / relevant income, for my voluntary contributions under the Scheme as outlined above.

Chan Tai Man

15/4/2020

成員簽署 Member's Signature

日期 Date

由僱主填寫 For Employer Use Only

參與自願性供款計劃日期 Date Joined Voluntary Contribution Plan	自願性供款歸屬起計日期 Vesting Date of Employer's Voluntary Contribution
_____ 日 DD / 月 MM / 年 YYYY	_____ 日 DD / 月 MM / 年 YYYY
授權簽署及公司印章 Authorized Signature(s) with Company Chop	
日期 Date	

公司專用 For Official Use Only	Input by : _____	Date : _____	Verified by : _____	Date : _____
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### **3.3 Change of Member's Investment Choice**

Members may elect a new investment mix of the existing constituent funds and/or choose a new investment choice for their future contributions by submitting a "Change of Investment Fund Instruction" 《MY MC RB》 or submit a "Fund Switching Instruction" 《MY SWITCHING》 to switch individual funds in percentage for their existing account balance to *BOCPT*.

#### **Notes for Completion of "Change of Investment Fund Instruction Form"**

The Form comprise of 2 parts :

Part I: Fill in the Personal Details of Scheme Member.

Part II: Indicate the investment fund instruction

- Investment Choice of Existing Account Balance

This instruction will rebalance the **existing** investment fund account balances, the investment mandate for future contributions (i.e. future contributions and accrued benefits transferred from another MPF scheme) will remain unchanged.

- Investment Choice of Future Contributions

This instruction will apply to your **future contributions** only (i.e. future contributions and accrued benefits transferred from another MPF scheme), and will not apply to your existing investment fund account balances.

Members should sign (same specimen signature as on the member enrolment form) and date the Notice.

#### **Notes for Completion of "Fund Switching Instruction"**

The Form comprise of 2 parts :

Part I: Fill in the Personal Details of Scheme Member.

Part II: Indicate fund switching instruction for existing account balance

- Mandatory Contributions

This instruction will switch the **existing** mandatory contribution of employer and employee portion but the investment mandate for future contributions will remain unchanged.

- Standard Voluntary Contribution

This instruction will switch the **existing** standard voluntary contribution of employer and employee portion but the investment mandate for future contributions will remain unchanged.

- Special Voluntary Contribution

This instruction will **both** switch the **existing** regular and ad-hoc special voluntary contributions but the investment mandate for future contribution will remain unchanged.

**Members should sign (same specimen signature as on the member enrolment form) and date the Notice.**

Sample of “Change of Investment Fund Instruction”

# 我的 MY CHOICE 強積金計劃

MANDATORY PROVIDENT FUND SCHEME

MY MC RB

**更改投資基金組合授權書 (適用於新供款及/或現有戶口結餘)**  
**Change of Investment Fund Instruction (for Future Contribution and/or Existing Account Balances)**

**注意 Note:**

1. 請以正楷填寫。  
Please complete in BLOCK LETTERS.
2. 若未有適當簽署本表格，本表格將被視為無效，受託人並無責任執行本表格上填寫的指示。  
The form would be deemed invalid if it is not duly signed, and the trustee shall be under no obligation to process the instruction.
3. 請於任何刪改處等處加蓋。  
Please initial next to any alterations made on the form.
4. 此指示將不包括特別自願性供款。  
Special Voluntary Contribution is not included in this instruction.
5. 中銀國際英國保誠信託有限公司(「受託人」)會於收到閣下適當填寫的表格後兩個工作天內處理閣下的指示。有關表格將於完成上述指示後一星期內寄發。如閣下未收到有關表格或有任何疑難，請即致電 2929-3366 與本公司的客戶服務代表聯絡。  
Your instructions will be processed within 2 working days after BOCI-Prudential Trustee Limited (the "Trustee") receives your duly completed form. A confirmation statement will be issued within 1 week after completion of your instructions. Please contact our Customer Service Representatives at 2929-3366 if you do not receive the statement or any error is found.
6. 若閣下想轉換現有戶口資產之投資分佈，請填寫「基金轉換指示(只適用於現有戶口結餘)」。  
If you wish to give the switching instruction, please fill in "Fund Switching Instruction (for Existing Account Balance Only)".
7. 為免重覆，已填寫之表格，無須再行郵寄。  
After you have filled the completed form, please do not mail the form to avoid duplication.
8. 於同日以前上，填寫或郵遞方法遞交之「現有戶口結餘之基金轉換指示」或「重新調配有戶口的投資基金組合指示」，只受理其中一項，並以本公司最新收到的指示為準。  
Only ONE request of either "Fund Switching Instruction for Existing Account Balance" or "Rebalancing of Existing Account Balance" via WEB, facsimile or mailing in the same day will be accepted, and the latest instruction received by us will prevail.
9. 於此重新調配的指示未完成之前，不能接受新遞交之「現有戶口結餘之基金轉換指示」或「重新調配有戶口的投資基金組合指示」。  
Before this rebalancing instruction has completed, new request of either "Fund Switching Instruction for Existing Account Balance" or "Rebalancing of Existing Account Balance" will not be accepted.
10. 有關轉換之基金單位之數額有機會引致同一成分基金總單位總數超出已發行單位總數的 10%，有關轉換有可能分拆不同日子處理。  
If your number of units to be redeemed in this instruction may result in exceeding 10% of the total number of units in issue, your instruction may be processed on separate dates.

(I) 計劃成員資料 PERSONAL DETAILS OF SCHEME MEMBER

計劃編號 Scheme No. <b>30012345678</b>	成員姓名 Member Name		
	中文 <b>陳大文</b> *先生/女士	English <b>Chan Tai Man</b>	
香港身份證號碼 HKID Card/Passport No. <b>A123456(7)</b>	流動電話號碼 Mobile Phone No. <b>9000 0000</b>	住宅電話號碼 Residential Phone No. <b>2000 0000</b>	電郵地址 E-mail Address <b>tmc@abcmail.com.hk</b>

\* 請刪去不適用者。 \* Please delete whichever is inappropriate.

(II) 投資指示 INVESTMENT INSTRUCTION

請指示有關供款之新的投資組合。就每類供款之投資指示，每項已選擇的投資選項分佈必須為整數及不少於5%，而所有已選擇的投資選項總和必須為100%，否則閣下的投資指示將被視為無效，受託人將沒有責任處理有關指示。閣下的投資將按照寄頁指示作出投資，直至閣下另行通知受託人為止。預設投資策略是一個現成及設有收費上限的強積金投資方案，並設有按年齡自動降低投資風險的特點。成分基金及預設投資策略詳情請參閱有關銷售文件，該等文件可向強積金中介人或客戶服務中心索取，亦可於本公司網站 [www.bocpt.com](http://www.bocpt.com) 下載。成員必須注意投資市場可能出現顯著的波動，基金單位價格可跌可升。由於處理有關投資指示需要一定的時間，因此未必能夠保證達到閣下預期的結果。在作出投資選擇前，閣下必須小心衡量個人可承受風險的程度及財政狀況(包括閣下的退休計劃)。如有任何疑問，請諮詢閣下的獨立財務顧問了解更多詳情。請注意，當閣下有一項或多項特定的指示(包括但不限於贖回或轉換指示)與每年的降低風險同一日處理時，每年的降低風險將會待完成所有特定指示後才執行(如需要)。Please indicate your NEW investment choices for relevant contributions. **Investment instruction for each type of contributions must be an integer with a minimum of 5% per selected investment choice, and the total percentage must be equal to 100%; otherwise your investment instruction will be deemed invalid and the trustee shall be under no obligation to process the instructions.** Your investment will be processed as indicated overleaf until further notice to the contrary is received from you by the Trustee. Default Investment Strategy ("DIS") is a ready-made MPF investment strategy with fee caps, and also contains an automatic de-risking feature. Details of the funds and DIS please refer to the offering documents which are available upon request from MPF intermediaries or at the Customer Service Centre, it can also be downloaded from website at [www.bocpt.com](http://www.bocpt.com). Members should note that investment markets could fluctuate significantly. Fund prices may go down as well as up. There is no guarantee that, given the time required to implement relevant investment instructions, such instructions will achieve your desired results. Please carefully consider your own risk tolerance level and financial circumstances (as well as your own retirement plan) before making any investment choices. If in doubt, please contact your independent financial advisor for further details. Please note that when one or more of the specified instructions (including but not limited to redemption or switching instructions) are being processed on the annual date of de-risking for you, the annual de-risking will only take place after completion of these instructions where necessary.

● 閣下可隨時透過以下途徑作出有效的特定投資指示 You may make your valid specific investment instruction through the following channels at any time:

- (i) 互聯網 Internet
- (ii) 互動話音系統 Interactive Voice Response System
- (iii) 流動應用程式 Mobile apps
- (iv) 表格 Form

注意：如關於本部分作任何塗改，請於塗改處旁加蓋作實。 Note: Please countersign if any amendment is made in this part.

Version as at Nov 2022

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  
電郵 E-mail: mpf@bcpt.com

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



(II) 投資指示 (續) INVESTMENT INSTRUCTION (CONTINUED)

投資選擇 Investment Choice		現有賬戶結餘 <sup>(1), (2)&amp;(4)</sup> Existing Account Balances <sup>(1), (2)&amp;(4)</sup>		新供款 <sup>(2)&amp;(3)</sup> Future Contributions <sup>(2)&amp;(3)</sup>	
		強制性供款 Mandatory Contributions	標準自願性供款 <sup>(2)</sup> Standard Voluntary Contributions <sup>(2)</sup>	強制性供款 Mandatory Contributions	標準自願性供款 <sup>(2)</sup> Standard Voluntary Contributions <sup>(2)</sup>
MyDIS	預設投資策略 Default Investment Strategy	20 %	20 %	%	%
MyGF	我的增長基金 My Choice Growth Fund	%	%	%	%
MyBF	我的均衡基金 My Choice Balanced Fund	%	%	30 %	30 %
MySF	我的平穩基金 My Choice Stable Fund	60 %	60 %	%	%
MyGE	我的環球股票基金 My Choice Global Equity Fund	%	%	%	%
MyAE	我的亞洲股票基金 My Choice Asia Equity Fund	%	%	%	%
MyCE	我的中國股票基金 My Choice China Equity Fund	%	%	30 %	30 %
MyHKE	我的香港股票基金 My Choice Hong Kong Equity Fund	%	%	%	%
MyTF	我的香港追蹤指數基金 My Choice Hong Kong Tracking Fund	%	%	%	%
MyGB	我的環球債券基金 My Choice Global Bond Fund	20 %	20 %	30 %	30 %
MyHB	我的港元債券基金 My Choice HKD Bond Fund	%	%	10 %	10 %
MyRMM	我的人民幣及港元貨幣市場基金 My Choice RMB & HKD Money Market Fund	%	%	%	%
MyCPE	我的強積金保守基金 My Choice MPF Conservative Fund	%	%	%	%
MyCAF	我的核心累積基金 My Choice Core Accumulation Fund	%	%	%	%
MA65F	我的 65 歲後基金 My Choice Age 65 Plus Fund	%	%	%	%
注意：降低風險機制將不適用於獨立選擇的「我的核心累積基金」及/或「我的 65 歲後基金」。 Note: De-risking mechanism would not apply to standalone My Choice Core Accumulation Fund and/or My Choice Age 65 Plus Fund.					
總計 TOTAL		100 %	100 %	100 %	100 %

註：如作更改，請即通知本局。  
 Note: Please contact us if any are subject to make.

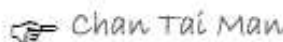
備註 Remarks:

- (1) 此指示將重新調整現有戶口的投資基金組合結餘，並不適用於新供款（即新供款及轉移自另一項強積金計劃的累積權益）的供款投資組合。  
This instruction will rebalance the **existing** investment fund account balances, and will not apply to the investment mandate for **future contributions** (i.e. future contributions and accrued benefits transferred from another MPF scheme).
- (2) 此指示只適用於新供款（即新供款及轉移自另一項強積金計劃的累積權益）的投資組合，並不適用於現有戶口結餘。  
This instruction will apply to your **future contributions** only (i.e. future contributions and accrued benefits transferred from another MPF scheme), and will not apply to your existing investment fund account balances.
- (3) 指示將不包括額外自願性供款。  
Special Voluntary Contribution is not included in this instruction.
- (4) 請注意，如閣下只就某類型供款之累積權益作出投資指示，其他供款類型之累積權益的投資安排將維持不變。  
Please note that if you give investment instruction to certain types of contributions only, the investment arrangement of accrued benefits of other types of contributions will remain unchanged.

成員全名 Member's Full Name

Chan Tai Man

成員簽署 Member's Signature

 Chan Tai Man

日期 Date 01/04/2020

公司專用 For Official Use Only

Input by:	Date:	Verified by:	Date:
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Sample of “Fund Switching Instruction (for Existing Account Balance Only)”



MY SWITCHING

基金轉換指示 (只適用於現有戶口結餘)  
Fund Switching Instruction (for Existing Account Balance Only)

注意 Note:

- 請以正楷填寫。Please complete in BLOCK LETTERS.
- 若未有適當簽署本表格，本表格將被視為無效，受託人並無責任執行本表格上填寫的指示。The form would be deemed invalid if it is not duly signed, and the trustee shall be under no obligation to process the instruction.
- 請於任何刪改處旁邊加蓋。Please initial next to any alterations made on the form.
- 中銀國際英國保誠信託有限公司(「受託人」)會於收到閣下適當填妥的表格後兩個工作天內處理閣下的指示。有關報表將於完成上述指示後一星期內寄發，如閣下未收到有關報表或有任何錯誤，請即致電 2929-3366 與本公司的客戶服務代表聯絡。Your instructions will be processed within 2 working days after BOCI-Prudential Trustee Limited (the “Trustee”) receives your duly completed form. A confirmation statement will be issued within 1 week after completion of your instructions. Please contact our Customer Service Representatives at 2929-3366 if you do not receive the statement or any error is found.
- 若閣下想重新調配現有戶口的投資基金組合或更改新供款投資組合/重新調配特別自願性供款的投資基金組合，請填寫「更改特別自願性供款投資基金組合授權書」。If you wish to rebalance the existing investment fund account balances or change your investment choice for the future contribution / rebalance the special voluntary contribution account balances, please fill in “Change of Investment Fund Instruction of Special Voluntary Contribution”.
- 若閣下想重新調配現有戶口的投資基金組合或更改新供款投資組合/重新調配可扣稅自願性供款的投資基金組合，請填寫「更改可扣稅自願性供款投資基金組合授權書」。If you wish to rebalance the existing investment fund account balances or change your investment choice for the future contribution / rebalance the tax deductible voluntary contribution account balances, please fill in “Change of Investment Fund Instruction of Tax Deductible Voluntary Contributions”.
- 為免重複，已傳真之表格，概須再另行郵寄。After you have faxed the completed form, please do not mail the form to avoid duplication.
- 如閣下轉換的基金單位之數額有機會引致同一成分基金總回報單位總數超出已發行單位總數的 10%，有關轉換有可能分開不同日子處理。If your number of units to be redeemed in this instruction may result in exceeding 10% of the total number of units in issue, your instruction may be processed on separate dates.

(I) 計劃成員資料 PERSONAL DETAILS OF SCHEME MEMBER

計劃編號 Scheme No. 30012345678	成員姓名 Member Name 中文 陳大文 English Chan Tai Man *先生/女士 *Mr/Ms	流動電話號碼 Mobile Phone No. 98765432	住宅電話號碼 Residential Phone No. 23456789	電郵地址 E-mail Address tmc@mail.com
香港身份證/護照*號碼 HKID Card/Passport* No A123456(7)				

\* 請刪去不適用者。\* Please delete which ver is inappropriate.

(II) 現有戶口結餘的基金轉換指示 FUND SWITCHING INSTRUCTION FOR EXISTING ACCOUNT BALANCE

請指示現有戶口結餘之基金轉換，供款戶口內的所有結餘，包括備用部分及成員部分(如適用，但不包括未來所支付的供款)將按照背頁指示作出基金轉換。  
Please indicate your fund switching instruction for the existing fund account balances. All balances standing in the credit of all contribution accounts including the employer's portion and the member's portion (if applicable, but excluding future contributions) will be processed as indicated overleaf.

就與特別自願性供款有關的基金轉換指示，該指示將適用於定期特別自願性供款。  
For the fund switching instruction relating to special voluntary contributions, the instruction shall apply to regular special voluntary contributions.

就與可扣稅自願性供款有關的基金轉換指示，該指示將同時適用於定期及點數可扣稅自願性供款。  
For the fund switching instruction relating to tax deductible voluntary contributions, the instruction shall apply to both regular and lump sum tax deductible voluntary contributions.

「轉出百分比」指閣下欲贖回現時所持有的基金單位之百分比(請注意，剩餘之百分比將繼續投資於現有基金)。閣下可填寫多於一項投資基金於「轉出百分比」內，閣下可填寫一個類型之供款分別作出投資指示。如閣下只就某類型供款之某單權益作出投資指示，其他供款類型之某單權益之投資安排將維持不變。  
“Switching Out %” means the percentage of current units holding of a fund you wish to redeem (Please note that the remaining % will continue to invest in current funds). You may fill in more than one investment fund under the “Switching Out %” column. You may give investment instruction for each type of contributions separately, if you give investment instruction to certain types of contributions only, the investment arrangement of accrued benefits of other types of contributions will remain unchanged.

所有百分比應是整數且每項不少於 5% 及「轉出資產的分配」內的總計必須為 100%，否則此指示將被視為無效，受託人將沒有責任處理有關指示。  
All percentage must be an integer with a minimum of 5% per selected investment choice and the total under “Allocation of Switch Out Proceeds” should be 100%, otherwise this instruction will be treated as invalid and the trustee shall be under no obligation to process or execute the instruction.

於同日或以上，傳真或郵遞方法提交之「現有戶口結餘的基金轉換指示」或「重新調配現有戶口的投資基金組合指示」，只受理其中一選，並以本公司最新收到的指示為準。  
Only ONE request of either “Fund Switching Instruction for Existing Account Balance” or “Rebalancing of Existing Account Balance” via WES, facsimile or mailing in the same day will be accepted, and the latest instruction received by us will prevail.

於上述基金轉換交易未完成之前，不能提交新提交之「現有戶口結餘的基金轉換指示」或「重新調配現有戶口的投資基金組合指示」。  
Before this switching transaction has completed, new request of either “Fund Switching Instruction for Existing Account Balance” or “Rebalancing of Existing Account Balance” will not be accepted.

預設投資策略是一個現成及沒有收費上調的強積金投資方案，並設有按年自動降低投資風險的特點。成分基金及預設投資策略詳情請參閱有關銷售文件，該等文件可向強積金中介人或客戶服務中心索取，亦可於本公司網站 [www.bocip.com](http://www.bocip.com) 下載。  
Default Investment Strategy (“DIS”) is a ready-made MPF investment strategy with fee cap, and also contains an automatic de-risking feature. Details of the constituent funds and DIS please refer to the offering documents which are available upon request from MPF intermediaries or at the Customer Service Centre, it can also be downloaded from website at [www.bocip.com](http://www.bocip.com).

成員必須注意投資市場可能出現顯著波動，基金單位價格可跌可升。由於處理有關投資指示需要一定的時間，因此未必能夠保證達到閣下預期的結果，在作出投資選擇前，閣下必須小心衡量個人可承受風險的程度及財政狀況(包括閣下的退休計劃)。如有任何疑問，請諮詢閣下的獨立財務顧問了解更多詳情。  
Members should note that investment markets could fluctuate significantly. Fund prices may go down as well as up. There is no guarantee that, given the time required to implement relevant investment instructions, such instructions will achieve your desired results. Please carefully consider your own risk tolerance level and financial circumstances (as well as your own retirement plan) before making any investment choices. If in doubt, please contact your independent financial adviser for further details.

請注意，當閣下有一項或多項特定的指示(包括但不限於贖回或轉換指示)與每年的降風險日期一日處理時，每年的降風險將會待完成所有特定指示後才執行(如需要)。  
Please note that when one or more of the specified instructions (including but not limited to redemption or switching instructions) are being processed on the annual date of de-risking for you, the annual de-risking will only take place after completion of these instructions where necessary.

閣下可隨時透過以下途徑作出有效的特定投資指示：  
You may make your valid specific investment instruction through the following channels at any time:  
(i) 互聯網 Internet (ii) 互動語音系統 Interactive Voice Response System (iii) 流動應用程式 Mobile apps (iv) 密格 Form

注意：如關於本部分作任何更改，請於該處加蓋作實。 Note: Please counter-sign if any amendment is made in this part.

Version as at Nov 2022

中銀國際英國保誠信託有限公司  
香港太古城英皇道 1111 號 1507 室  
電郵 E-mail: mpf@bocip.com

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





(II) 現有戶口結餘的基金轉換指示 (續)

FUND SWITCHING INSTRUCTION FOR EXISTING ACCOUNT BALANCE (CONTINUED)

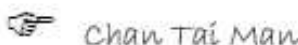
投資選擇 Investment Choice		強制性供款 Mandatory Contributions		標準自願性供款 Standard Voluntary Contributions		定期特別自願性供款 Regular Special Voluntary Contributions		可扣稅自願性供款 (包括定期及零碎供款) Tax Deductible Voluntary Contributions (Include Regular and Lump Sum contributions)	
		轉出百分比 Switch Out %	轉出資產的分配 Allocation of Switch Out Proceeds	轉出百分比 Switch Out %	轉出資產的分配 Allocation of Switch Out Proceeds	轉出百分比 Switch Out %	轉出資產的分配 Allocation of Switch Out Proceeds	轉出百分比 Switch Out %	轉出資產的分配 Allocation of Switch Out Proceeds
預設投資策略 Default Investment Strategy	MyDIS	%	%	%	%	%	%	%	%
我的增長基金 My Choice Growth Fund	MyGF	%	%	%	%	%	%	%	%
我的均衡基金 My Choice Balanced Fund	MyBF	%	%	%	%	%	%	%	%
我的平穩基金 My Choice Stable Fund	MySF	50 %	%	50 %	%	%	%	%	%
我的環球股票基金 My Choice Global Equity Fund	MyGE	%	%	%	%	50 %	%	%	%
我的亞洲股票基金 My Choice Asia Equity Fund	MyAE	%	%	%	%	%	%	%	%
我的中國股票基金 My Choice China Equity Fund	MyCE	%	%	%	%	%	%	%	%
我的香港股票基金 My Choice Hong Kong Equity Fund	MyHKE	%	%	%	%	%	%	%	%
我的香港追蹤指數基金 My Choice Hong Kong Tracking Fund	MyTF	%	%	%	%	%	%	%	%
我的環球債券基金 My Choice Global Bond Fund	MyGB	%	%	%	%	%	%	%	%
我的港元債券基金 My Choice HKD Bond Fund	MyHB	%	%	%	%	%	%	%	%
我的人民幣及港元貨幣市場基金 My Choice RMB & HKD Money Market Fund	MyRMM	%	%	%	%	%	%	%	%
我的強積金保守基金 My Choice MPF Conservative Fund	MyCPE	%	%	%	%	%	%	%	%
我的核心累積基金 My Choice Core Accumulation Fund	MyCAF	%	100 %	%	%	%	20 %	%	%
我的 65 歲後基金 My Choice Age 65 Plus Fund	MA65F	%	%	%	100 %	%	80 %	%	%
注意：降低風險機制將不適用於獨立選擇的「我的核心累積基金」及/或「我的 65 歲後基金」。 Note: De-risking mechanism would not apply to standalone My Choice Core Accumulation Fund and/or My Choice Age 65 Plus Fund.									
		總計 TOTAL	100%	總計 TOTAL	100%	總計 TOTAL	100%	總計 TOTAL	100%

注意：如有更改，請即通知。

成員全名 Member's Full Name

Chan Tai Man

成員簽署 Member's Signature



日期 Date 01/04/2020

公司專用 For Official Use Only

Input by:	Date:	Verified by:	Date:
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### 3.4 Withdrawal of Mandatory Contribution by Employee

Under the MPF legislation, members are entitled to claim and withdraw all their accrued benefits when they meet one of the following criteria: -

	Criteria	Required Form and Supporting Documents
A	Attain the statutory retirement age of 65	<p>◇ Original “<b>Claim Form For Payment of Accrued Benefits on Ground of Attaining the Retirement Age of 65 or Early Retirement</b>” 《MY CLAIM FORM (MPF(S)-W(R))》</p> <p>◇ Copy of the scheme member’s HKID card for verification of the name, date of birth and identity card number of the scheme member if the claimant does not wish to present the card in person for verification</p> <p>◇ For a scheme member whose HKID card does not contain the month and/or day of birth, evidence showing the scheme member’s date of birth:</p> <ul style="list-style-type: none"> <li>◆ Copy of the scheme member’s passport or other travel document showing the month and/or day of birth; or</li> <li>◆ Copy of the scheme member’s HKID card with the day and month of the issue date of the HKID card circled or by other means to indicate that the scheme member wishes to use the day and month of the issue date of the HKID card as the day and month of birth; or</li> <li>◆ The Original statutory declaration of the scheme member’s date of birth</li> </ul> <p>If the scheme member has not used any of the methods above to provide evidence as to the month and day, then in the absence of the above evidence, the approved trustee will:</p> <p>(i) where the HKID card shows only the year and month of birth (and not the day of birth), use the last day of the month as shown on the HKID card as the birth date of the scheme member; and</p> <p>(ii) where the HKID card shows only the year of birth (and neither the month nor day of birth), use the last day of the year as shown on the HKID card as the birth date of the scheme member.</p> <p>Note: With effect from 1 February 2016, when scheme members retire or early retire, they are allowed to withdraw accrued benefits by <b>instalments</b> in addition to withdrawing accrued MPF benefits in a lump sum or retaining benefit in the scheme. No fee will be imposed on the lump sum payment of accrued benefits or the first twelve withdrawals by instalments each calendar year, but each additional partial withdrawal afterwards will be subject to a handling fee of HK\$100.</p>
B	Early retired between 60 and 64	<p>◇ Original “<b>Claim Form For Payment of Accrued Benefits on Ground of Attaining the Retirement Age of 65 or Early Retirement</b>” 《MY CLAIM FORM (MPF(S)-W(R))》</p> <p>◇ Original “<b>Statutory Declaration for Claims for Payment of Accrued Benefits on Ground of Early Retirement</b>” 《Form MPF(S)-W(SD1)》</p> <p>◇ Copy of the scheme member’s HKID card for verification of the name, date of birth and identity card number of the scheme member if the claimant does not wish to present the card in person for verification</p> <p>◇ For a scheme member whose HKID card does not contain the month and/or day of birth, evidence showing the scheme member’s date of birth:</p> <ul style="list-style-type: none"> <li>◆ Copy of the scheme member’s passport or other travel document showing the month and/or day of birth; or</li> <li>◆ Copy of the scheme member’s HKID card with the day and month of the issue date of the HKID card circled or by other means to indicate that the scheme member wishes to use the day and month of the issue date of the HKID card as the day and month of birth; or</li> <li>◆ The Original statutory declaration of the scheme member’s date of birth</li> </ul> <p>If the scheme member has not used any of the methods above to provide evidence as to the month and day, then in the absence of the above evidence, the approved trustee will:</p> <p>(i) where the HKID card shows only the year and month of birth (and not the day of birth), use the last day of the month as shown on the HKID card as the birth date of the scheme member; and</p> <p>(ii) where the HKID card shows only the year of birth (and neither the month nor day of birth), use the last day of the year as shown on the HKID card as the birth date of the scheme member.</p> <p>For a claim made by the committee of the estate on behalf of the scheme member,</p>

		<p>in addition to the required documents in respect of the scheme member, the following documents should be enclosed:</p> <ul style="list-style-type: none"> <li>(i) Copy of the evidence of the status of the committee of the estate, i.e. the court order;</li> <li>(ii) Copy of each claimant's HKID card for verification of the name and identity card number of the claimant if the claimant does not wish to present the card in person for verification ; and</li> <li>(iii) The original statutory declaration form made by the committee of the estate for a claim for payment of accrued benefits (Form MPF(S) - W(SD4)) (if applicable). Where such a statutory declaration has been made and enclosed with the claim, the statutory declaration form (MPF(S)-W(SD1)) for a claim made on the ground of early retirement shall not be required.</li> </ul> <p>Note: With effect from 1 February 2016, when scheme members retire or early retire, they are allowed to withdraw accrued benefits by <b>instalments</b> in addition to withdrawing accrued MPF benefits in a lump sum or retaining benefit in the scheme. No fee will be imposed on the lump sum payment of accrued benefits or the first twelve withdrawals by instalments each calendar year, but each additional partial withdrawal afterwards will be subject to a handling fee of HK\$100.</p>
C	Death	<ul style="list-style-type: none"> <li>✧ Original <b>“Claim Form for Payment of Accrued Benefits on Ground of Permanent Departure from Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death”</b> 《MY CLAIM FORM (MPF(S)-W(O))》</li> <li>✧ Copy of the claimant's HKID card for verification of the name and identity card number of the claimant if the claimant does not wish to present the card in person for verification</li> <li>✧ Copy of the Letter of Probate or Letters of Administration granted by the Probate Registry / a letter requesting withdrawal of the accrued benefits issued by the Official Administrator if the claim is made by the Official Administrator</li> </ul>
D	Permanent departure from Hong Kong	<ul style="list-style-type: none"> <li>✧ Original <b>“Claim Form for Payment of Accrued Benefits on Ground of Permanent Departure from Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death”</b> 《MY CLAIM FORM (MPF(S)-W(O))》</li> <li>✧ Original <b>“Statutory Declaration for Claims for Payment of Accrued Benefits on Ground of Permanent Departure From Hong Kong”</b> 《Form MPF(S)-W(SD2)》 that requires the provision of destination.</li> <li>✧ Copy of the scheme member's HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification</li> <li>✧ Copy of the documents / evidence that the scheme member is permitted to reside in a place other than Hong Kong (e.g. immigration visa/foreign passport).</li> <li>✧ Copy of the letter of Release issued by the Inland Revenue Department, if applicable</li> <li>✧ Information on overseas settlement <ul style="list-style-type: none"> <li>◆ Place other than Hong Kong where the scheme member is permitted to reside Overseas contact details</li> <li>◆ departure reason(s)</li> </ul> </li> </ul> <p>For a claim made by the committee of the estate on behalf of the scheme member, in addition to the required documents in respect of the scheme member, the following documents should be enclosed:</p> <ul style="list-style-type: none"> <li>(i) Copy of the evidence of the status of the committee of the estate, i.e. the court order;</li> <li>(ii) Copy of each claimant's HKID card for verification of the name and identity card number of the claimant if the claimant does not wish to present the card in person for verification; and</li> <li>(iii) The original <b>“Statutory Declaration made by the Committee of the Estate of a Scheme Member for Claims for Payment of Accrued Benefits”</b> 《Form MPF(S)-W(SD4)》. Where such a statutory declaration has been made and enclosed with the claim, the statutory declaration form (MPF(S) – W(SD2) for claims made on the grounds of permanent departure from Hong Kong shall not be required.</li> </ul>
E	Total incapacity	<ul style="list-style-type: none"> <li>✧ Original <b>“Claim Form for Payment of Accrued Benefits on Ground of Permanent Departure from Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death”</b> 《MY CLAIM FORM (MPF(S)-W(O))》</li> <li>✧ Copy of <b>“Certificate of a Person's Permanent Unfitness for a Particular Kind of Work”</b> 《Form MPF(S)-W(M)》</li> <li>✧ Copy of the scheme member's HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification</li> </ul>

F	Terminal illness	<ul style="list-style-type: none"> <li>✧ Original “<b>Claim Form for Payment of Accrued Benefits on Ground of Permanent Departure from Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death</b>” 《MY CLAIM FORM (MPF(S)-W(O))》</li> <li>✧ <b>Copy of the medical certificate certifying terminal illness</b> 《FORM MPF(S)-W(T)》 (dated not earlier than 12 months before the date on which the claim is lodged)</li> <li>✧ Copy of the scheme member’s HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification</li> </ul> <p>Note<sup>1</sup>: Terminal Illness refers to an illness that is likely to reduce the member's life expectancy to 12 months or less as certified by a registered medical practitioner or registered Chinese medicine practitioner ("CMP").</p> <p>Note<sup>2</sup>: If employers intend to make long-service payment/severance payment (LSP/SP) to a leaving employee (and apply for offsetting the LSP/SP with accrued benefits derived from the employer’s contributions afterwards), <b>please contact us before you do so</b> as soon as practicable to check the net amount of your contributions in relevant employee’s MPF account. Otherwise, if part of or all of the accrued benefits derived from your contributions have already been withdrawn on grounds of Terminal Illness by the employee in the course of employment, you may find it impossible to be reimbursed after making full payment of LSP / SP to such employee.</p>
G	<p>Small balance account accounts aggregate amount less than HK\$5,000 provided that as at the date of the claim, at least 12 months have elapsed since the contribution day in respect of the latest contribution period for which a mandatory contribution is required to be made to that scheme or to any other registered scheme by or in respect of the member; and that the member concerned does not have accrued benefits kept in any other registered scheme and does not intend to become employed or self-employed.</p>	<ul style="list-style-type: none"> <li>✧ Original “<b>Claim Form for Payment of Accrued Benefits on Ground of Permanent Departure from Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death</b>” 《MY CLAIM FORM (MPF(S)-W(O))》</li> <li>✧ Original “<b>Statutory Declaration for Claims for Payment of Accrued Benefits on Ground of Small Balance</b>” 《Form MPF(S)-W(SD3)》</li> <li>✧ Copy of the scheme member’s HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification</li> </ul> <p>For a claim made by the committee of the estate on behalf of the scheme member, in addition to the required documents in respect of the scheme member, the following documents should be enclosed:</p> <ul style="list-style-type: none"> <li>(i) Copy of the evidence of the status of the committee of the estate, i.e. the court order;</li> <li>(ii) Copy of each claimant’s HKID card for verification of the name and identity card number of the claimant if the claimant does not wish to present the card in person for verification; and</li> <li>(iii) The original “<b>Statutory Declaration made by the Committee of the Estate of a Scheme Member for Claims for Payment of Accrued Benefits</b>” 《Form MPF(S)-W(SD4)》. Where such a statutory declaration has been made and enclosed with the claim, the statutory declaration form (MPF(S) – W(SD3)) for claims made on the grounds of small balance respectively shall not be required.</li> </ul>

**Notes for Completion of the required supporting documents:**

A claimant should complete and submit the form as specified above together with the following declaration/certificate to BOCPT.

	<b>Statutory Declaration for Claims for payment of Accrued Benefits on Ground of Early Retirement</b>	<b>Statutory Declaration for Claims for Payment of Accrued Benefits on Ground of Permanent Departure From Hong Kong</b>	<b>Statutory Declaration for Claims for Payment of Accrued Benefits on Ground of Small Balance</b>	<b>Certificate of a Person's Permanent Unfitness for a Particular Kind of Work</b>	<b>Medical Certificate for scheme member for payment of accrued benefits on grounds of terminal illness</b>
Employee Name	✓	✓	✓	✓	✓
Employee Address	✓	✓	✓		
Employee should sign the same signature as his/her enrolment form	✓	✓	✓		
This part is for Commissioner for Oaths to complete & sign	✓	✓	✓		
Employee reaches 60 years old	✓				
Date of Employee's Departure from Hong Kong		✓			
This declaration form should be filled by the medical practitioner				✓	✓

***The content of this Employer's Guide is for reference only. Please refer to the latest announcement of the Mandatory Provident Fund Schemes Authority for the updated information on the legislative requirements and the details of enforcement.***