

| Office Use On | ly 本公司專用 |
|---------------------|----------|
| Scheme No.: 計劃編號 | |

MASS Mandatory Provident Fund Scheme

Application Form

(Relevant Employer)

萬全強制性公積金計劃

申請書

(有關僱主)

| Name of Applicant / Employer 申請人姓名/僱主名稱 | | | | | | |
|--|--|--------------------------------|--|---|---|--|
| Office Address 公司地址 | | | | | | |
| Business Registration No.# 商業登記號碼 [#] | | | | | | |
| | ☐ Catering € | | ☐ Security Gua | | | |
| Industry Type 行業類別 | ☐ Constructi ☐ Manufactu ☐ Transport ☐ Cleaning ; ☐ Others 其 | Iring 製造 運輸 青潔 | ☐ Community/3☐ Wholesale/R | Social/Personal | Services 社區/ネd Export Trades : | rvices 金融/保險/地產/商用服務 ±會/個人服務 比發/零售/進出口貿易 |
| Contact Person 聯絡人 | | | | | | |
| Tel No. | | | Fax | No. | | |
| 電話 | | | | | | |
| Email Address 電郵地址 | | | | | | |
| . Scheme Effective Date 計劃生效日期 | / | /_ | | | st be completed | i.) |
| I DI I MI | MM月 | DD日 | YY年 | (此欄必須填寫 | ₹ °) | |
| 計劃性質 (Plea | ferred Scheme se attach a copy o 轉計劃 (請連同填 | | | | w Scheme 十劃 | |
| Contribution Payment Method | | Ву | □ Direct De | eposit 🗆 | Autopay | |
| 支付供款方法 | | Cheque 支票 | 直接存款 | t | 自動轉賬 | |
| | 供款:According t | 支票 | | | | 供款。 |
| Mandatory Contribution 強制性 Voluntary Contribution 自願性例 (If applicable, please provide the Definition 定義 | キ軟 following details. | 支票 [*] so the MPFS | Ordinance. 按: 是供下列資料。) Employer Con 僱主供款 in excess of the | 照強制性公積金 Applicable 適用 atribution he maximum le | 計劃條例的規定 | Not applicable 不適用 <u>Class</u> 類別 |
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7. Self-Certification of Tax Residency (Must Fill) 稅務居民身分自我證明(必須填寫)

- This is a Self-Certification provided by you to YF Life Trustees Ltd. 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 YF Life Trustees Ltd. to the Inland Revenue Department for which may further exchange such information to the competent authority of another reportable jurisdiction. 這是您向萬通信託有限公司提供的自我證明,作為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)。萬通信託有限公司可把收集所得的資料交給稅務局,稅務局會將資料交到另一申報稅務司法管轄區的主管部門。
- This Self-Certification will remain valid unless there is any change in circumstances relating to the status of tax residency(ies) of the Entity. You must notify YF Life Trustees Ltd. 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.

此自我證明是有效文件除非實體的稅務居民身分相關的情況有所改變。如情況有所改變,以致影響本聲明所述的 實體的稅務居民身分,或引致本表格任何部份所載的資料不正確,您必須在情況有所改變後的30天內通知萬通信 託有限公司有關的改變並提供最新的自我證明。

All relevant identification/ verification documentation will be provided to YF Life Trustees Ltd. 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.

萬通信託有限公司有權要求您提供所有相關的身分證明/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。



(OECD-CRS)

As a financial institution, YF Life Trustees Ltd. 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 http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/ and http://www.ird.gov.hk/eng/tax/dta_aeoi.htm respectively for more CRS and related information. 作為財務機構,萬通信託有限公司不獲允許提供稅務或法律意見。若您對您的稅務居民身分存有任何疑問,請諮詢專業稅務顧問或瀏覽OECD (http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/ 及稅務局(http://www.ird.gov.hk/eng/tax/dta_aeoi.htm)有關自動交換財務帳戶資料的網頁,以獲取更多CRS及相關資料。



(IRD 稅務局)

The Employer's Information, including name, business registration no., place of incorporation, registered address and business address, etc., provided in this form and other related documents form part of this self-certification.

於本表格及其他相關文件所提供的僱主資料,包括姓名、商業登記號碼、公司註冊地、登記地址及營業地址等,會成為此自我證明的一部分。

The Entity mentioned in this section refers corporations and partnerships (excluding sole proprietors). If you are a sole proprietor, please complete Parts 7(1),(2) and (5) only.

此部分所指之「實體」為法團或合夥 (獨資經營者除外)。如您是獨資經營者,只需填寫7(1)、(2)及(5)部份。

| (i) | | Hong Kong <u>ONLY</u> with no tax residence in any other jurisdictions or countries (the respective Taxpayer Identification Number (TIN) is as noted in * below) 只有 <u>香港</u> 及沒有處於任何其他司法管轄區或國家的稅務居住地(其稅務編號為註在下面*欄) (If you have submitted the BR copy with this application, you may skip Part 7(2). 如您已隨本申請表格透。商業登記證副本,您可略過7(2)部分。) |
|-------|------|---|
| (ii) | | Hong Kong(and the respective Taxpayer Identification Number (TIN) is as noted in ◆ below) and also some oth jurisdictions 是香港(及其稅務編號為註在下面◆欄)及其他司法管轄區 (If you have submitted the BR copy with this application, please fill out the TIN for all the jurisdictions, other than HK, in Part 7(2). 如您已随本申請表格遞交商業登記證副本,請於7(2)部分列出所有香港以外其他司管轄區的稅務編號。) |
| (iii) | | NOT Hong Kong, but instead some other jurisdictions 不是香港而是其他司法管轄區 (Please fill out Part 7(2). 請填寫7(2)部分。) |
| • | Enti | I payer Identification Number (TIN) 稅務編號: ty 實體:Hong Kong Business Registration Number provided 香港商業登記號碼前八位數字 e proprietor 獨資經營者: HKID Card No. 香港身份證號碼 |

[2] If a "d" is input in the box (ii) or (iii) above, please list all jurisdictions (other than Hong Kong if you have submitted the BR copy with this application) where the Entity is 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). Please refer to OECD website at: http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency or simply scan the QR code for tax residency related information.



如果在上面的第(ii)或(iii)項中加入"☑",請列明實體在當地為符合稅務目的之居民的所有國家 /司法管轄區(如您已隨本申請表格遞交商業登記證副本,香港以外)以及該國家 /司法管轄區發出的稅務編號或具有等同功能的識辨編號(TIN) 。如下列位置不敷應用,請按以下格式另加新頁。請參考經合組織網站的稅務居民 : http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency 或掃瞄此二維碼的稅務居民相關資料。

| | | | | | If no TIN available. | |
|---|--|-------------|--|--|----------------------|--|
| Jurisdiction of Tax Residency 稅務居民司法管轄區 | | TIN 稅務編號 | please indicate Reason A, B or C below 若未能提供稅務編號,請 於下方填上理由A、B或C | Please explain why you are unable to obtain a TIN if you selected Reason B. 若您選擇理由B,請在下方解釋無法取得稅務編號的原因。 | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| R | Reason 理由 A : The jurisdiction where the Entity is a resident for tax purposes does not issue TINs to its residents. 實體在當地為稅務居民的國家/司法管轄區不向其居民發出稅務編號。 | | | | ' | |
| R | | | | why you are unable to obtain TIN in the above | | |
| | table if you have selecte | | , | , | 解釋閣下無法獲得稅務編號的原因。) | |
| | oooon 珊 b C | | | | | if the authority of the relevant jurisdiction of |
| | | | e the TIN to be disclosed.) | in the authority of the relevant jurisdiction of | | |
| | | | | • | • | · 局不需要披露該司法管轄區發出的稅務編號方可 |
| | | | | 擇這理由。) | | |

If Employer is a sole-proprietorship, please skip Part 7(3) and complete Part 7(5).

如僱主屬獨資經營者,請略過7(3)部分並填寫7(5)部分。

| Financial Institution 財務機構 | Custodial Institution, Depository Institution or Specified Insurance Company 託管機構、存款機構或指明保險公司 |
|---|---|
| 灯 | |
| Active Non-Financial Entity ("NFE") 主動非財務實體 | which is an established securities market |
| | 該非財務實體的股票經常在 (一個具規模證券市場)進 Related entity of , the stock of which is regularly traded , which is an established securities market 為 的有關連實體,該有關連實體的股票經常在 (一個具規模證券市場)進行買賣 |
| | NFE is a governmental entity, an international organization, a central bank, o entity wholly owned by one or more of the foregoing entities 政府實體、國際組織、中央銀行或由前述的實體全權擁有的其他實體 |
| | |
| Passive Non-Financial Entity ("NFE") 被動非財務實體 | Investment entity that is managed by another financial institution and located non-participating jurisdiction 位於非參與稅務管轄區並由另一財務機構管理的投資實體 |
| | NFE that is not an active NFE 不屬主動非財務實體的非財務實體 |

| (4) | Controlling Person 控權人 | | | | |
|-----|---|---------------------|--|--|--|
| | Indicate the name of all controlling person(s) of the entity in the table below. If no natural person exercises control over an | | | | |
| | entity which is a legal person, the controlling person will be the individual holding the position of senior managing official. | | | | |
| | 請填寫實體之所有控權人的姓名在列表內。就法人實體,如没有自然人行使控制權,控權人將會是該法人實體的高級管理人員。 | | | | |
| | Complete Self Certification Form Centralling Person for each | controlling naroon | | | |
| | Complete Self-Certification Form – Controlling Person for each (每名控權人須分別填寫一份共同匯報標準的聲明書(控權人)。 | controlling person. | | | |
| | 每石径惟八須分別與為一切共同匯報标平的年明音(程惟八)。 | | | | |
| | (1) | (4) | | | |
| | ., | | | | |
| | (2) | (5) | | | |
| | (-) | (5) | | | |
| | (3) | (6) | | | |
| | (0) | (0) | | | |

| Name 姓名: Surname in | | English 英文姓氏 | Given Name in English 英文名字 | | |
|--------------------------------------|-------------------------|--------------|----------------------------|---------------------------|--|
| | Surname in Chinese 中文姓氏 | | Given Name in Chinese 中文名字 | | |
| HKID Card No. 香港; | 身份證號碼: | | Date of Birth 出生日期: | | |
| | | | | | |
| 護照號碼 (不適用於看 Current Residential A | , | : | | | |
| Current Residential A Room / Flat 室 | , | : Block 座 | Name of Buildir | ng / Estate 大廈/星邨名稱 | |
| Current Residential A | Address 現時住址 Floor 樓 | Block 座 | □ Hong Kong □ I | Kowloon ☐ New Territories | |
| Current Residential A | Address 現時住址 | Block 座 | | | |

❖ WARNING: It is an offence under section 80(2E) of the Inland Revenue Ordinance if any person, in making a declaration, 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)

警告: 根據《稅務條例》第80(2E)條,如任何人在作出聲明時,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。

Declaration 聲明:-

Personal Information Collection Statement

The information provided by Participating Employers or Members of the Scheme on this application form or other forms prescribed by YF Life Trustees Limited ("Trustee") and details of any transactions or dealings by such Participating Employers or Members may be held by the Trustee for the purposes of processing their participation in the Scheme and providing administrative, computer or any other services as may be considered necessary in connection with the MPF operation, and may also be used for observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure or notification requirements to which any recipient of the data is subject) and for providing information for the dispatch of information on MPF products or services from the Trustee. Please note that failure to provide any information requested by the Trustee may result in the Trustee not being able to process your process your participation in the Scheme. Your personal information collected by or held by the Trustee may be transferred or disclosed by the Trustee to any of the following persons (whether within or outside Hong Kong) for the purposes as specified above or to governmental / regulatory bodies (whether within or outside Hong Kong) for them to carry out their governmental / regulatory functions: (1) The Trustee group companies and their associated / affiliated companies; (2) governmental / regulatory bodies and law enforcement agencies; and (3) crime prevention organisations and their members/participants; and (4) service providers and selected persons which are under a duty of confidentiality to the Trustee. Participating Employers and Members have a right to require access to and correction of their company or personal data or to request that their company or personal data not be used for direct marketing purposes by giving written notice to the Trustee at the address at 27/F, 33 Lockhart Road, Wanchai, Hong Kong. The Trustee may charge a reasonable fee for the processing of such request.

收集個人資料聲明

參與僱主或計劃成員在本申請表或在萬通信託有限公司(下稱「受託人」)所指定表格提供的資料及該等人士的交易詳情可由受託人保留,以作為 批核參加本計劃申請之用途,並可用作提供行政、電腦或其他因強積金運作而需要的服務,並可用作遵行任何有關適用司法管轄區的法律、政府 或監管規定(包括任何人所收取到的資料披露及通知規定);及提供受託人用作發放其強積金產品或服務資料。請注意,閣下必須提供受託人所 需的個人資料,否則,受託人將不能處理閣下之參加本計劃申請。受託人可能為達到上述目的或讓政府/監管機構(不論在香港或海外)執行其 職務而向以下任何一方(不論在香港或海外)轉移或透露由受託人收集或持有屬於閣下的個人資料:(1)受託人集團成員公司及其關聯或相關公 司;(2)政府部門或監管機構和執法機構;及(3)防犯罪組織及其會員/參與者;及(4)與受託人有保密協議的服務提供者及其他人士。參與僱主和 計劃成員有權查閱及更正其公司或個人資料,閣下可致函受託人要求其公司或個人資料不得使用於直接促銷用途,並呈交至香港灣仔駱克道33號 27樓。處理上述要求時,受託人可能會收取合理費用。

Upon receipt of this application form, the Trustee will report the relevant information to the MPFA accordingly. The Participating Employer then has the obligation to make contributions as required by the Mandatory Provident Fund Scheme Ordinance. 受託人接獲本申請書後,便會向積金局報告有關資料,參與僱主其後須依強制性公積金計劃條例履行供款責任。

I have read and understood the MPF Scheme Brochure. 本人已閱讀並明白強積金計劃說明書的內容。

| Consultant Code |
|-----------------|
| 顧問編號 |
| |

- △1. For Corporation, this form needs to be signed by the director(s). 倘為法人公司,本表格必須由董事簽署。
- 2. For Sole Proprietorship, this form needs to be signed by Sole Proprietor. 倘為獨資經營公司,本表格必須由獨資經營者簽署。
- 3. For Partnership, this form needs to be signed by the partner(s). 倘為合伙經營公司,本表格必須由合伙人士簽署。

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

本申請書必須連同強積金計劃說明書一併發出。

Remarks 備註:

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

為避免延誤有關計劃申請程序,請核對以下資料並交回本部:-

- 1. The <u>original</u> copy of this Application Form. Please note that a faxed copy will not be accepted. 此計劃申請書的正本。敬請注意:本部不接受計劃申請書的傳真本。
- 2. Completed Member Enrolment Form by Individual Member with HKID Copy (Please stamp "COPY" on to the image of the photo in the copy); 由個別成員填妥之成員申請表格連同香港身份證副本(請於香港身份證副本上的人像上面印上「COPY」);
- 3. Business Registration Copy; (Please check the expiry date of the BR copy to ensure that it is a valid copy)

商業登記證副本; (請核對商業登記證副本上的到期日以確保其為有效副本)

- 4. Completed and signed Participation Agreement; 已填妥及簽妥之參與協議書;
- 5. Completed Direct Debit Authorization Form (If you choose "Autopay" payment method); 填妥之直接付款授權書(倘貴公司選擇以"自動轉賬"繳付供款);
- Completed Participation Employer's Request for Fund Transfer Form (MPF(S)-P(E)) for Transferred Scheme.
 如屬承轉計劃,請填妥僱主資金轉移申請表(MPF(S)-P(E))。
- 7. Completed MPF Customer Declaration Form (If this application is conducted by MPF subsidiary intermediary); 填妥之強積金客戶聲明書(倘本申請經附屬中介人處理);
- 8. Completed Form for Supplemetary Information and provide relevant information/ documents; 填妥之補充資料表格並提供有關資料/文件;
- 9. Please initial next to any corrections you make on this form. 如有任何删改,請於删改處旁簽署。

PARTICIPATION AGREEMENT FOR RELEVANT EMPLOYER 有關僱主參與協議

| THIS PARTICIPATION AGREEMENT is made on | | | |
|---|-------------|--|--|
| 本協議於 | (日期)由下列雙方簽訂 | | |

BETWEEN 有關雙方:

- (1) YF LIFE TRUSTEES LIMITED, whose registered office is at 27/F, YF Life Tower, 33 Lockhart Road, Wanchai, Hong Kong (the "Trustee"); and 萬通信託有限公司,其註冊辦事處位於香港灣仔駱克道33號萬通保險大廈27樓(下稱「受託人」);及
- (2) The Applicant / Employer, whose name and address are given in the Application Form attached hereto (the "Employer"). 申請人/僱主(下稱「僱主」),其名稱及地址填寫在計劃之申請書內。

RECITALS 敍文:

- (A) The Trustee is the Trustee of the Mass Mandatory Provident Fund Scheme (the "Master Trust Scheme"), which was established by a deed ("the Deed") dated 27 January 2000 made by the Trustee as amended from time to time. 萬全強制性公積金計劃(下稱「集成信託計劃」)依據於2000年1月27日由其受託人以不時修改的有關契約(下稱「有關契約」)成立,受託人為集成信託計劃的受託人。
- (B) The Employer wishes to join the Master Trust Scheme in order to establish a retirement benefits scheme (the "Participating Scheme") for the benefit of its employees. 僱主希望參與集成信託計劃,用以成立為保障其僱員利益之退休保障計劃(下稱「參與計劃」)。
- (C) The Participating Scheme shall be governed by the Deed and this Participation Agreement. 參與計劃將受有關契約及本參與協議規限。

PROVISIONS 條文:

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

 (僱主現成立一個參與計劃,於申請書的生效日起生效,並受有關契約及本參與協議的條款規限。
- 3. The Employer hereby covenants with the Trustee to comply with and be bound by the provisions of the Deed and this Participation Agreement and all applicable laws and regulations.

 《僱主現向受託人契諾遵守有關契約及本參與協議及所有適用法律和法規的規定並受其約束。
- 4. The Employer warrants that the information from time to time to be provided by the Employer in relation to contributions and as to the age, salary, length of service, benefits, Investment Mandates, Switching Instruction Forms and otherwise in relation to each Employee Member will be correct in all respects.

僱主保證,由僱主就供款不時提供的資料及關於每一名僱員成員的年齡、薪金、服務年期、福利、投資授權、轉換指令表格及其他資料在所有方面均是正確的。

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

在有關契約及本參與協議條款的規限下,僱主承諾且同意,對於任何和所有訴訟、訟費、收費、債項和開支,只要上述各項是因發生下列事件而引起與集成信託計劃或本參與協議有關的任何和所有法律行動、索償、要求或法律訴訟所導致的,一概會向受託人作出賠償:

- (a) arising out of the breach by the Employer of the warranty referred to in paragraph 4; or 因僱主違反第4條所述的保證而引起的;或
- (b) as a result of any failure or omission on the part of the Employer to duly and punctually perform or observe any obligations pursuant to the Deed and this Participation Agreement or otherwise so far as they relate to the Employer and Employee Members of the Participating Scheme (whether they relate to the Employer and such Employee Members alone or together with another Employer and Employee Members of other Participating Schemes).

因僱主未能妥善及準時地履行或遵守依照有關契約及本參與協議之任何責任或與參與計劃之僱主及僱員成員相關之責任(不論該等責任是否只與僱主及該等僱員成員有關、或是否同時與其他參與計劃下之另一僱主及僱員成員有關)所造成的失誤或遺漏。

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

僱主承諾且同意支付其在有關契約及本參與協議條款下應該支付的所有費用和開支。

7. The Each Employee Member shall become fully vested with the balance of his Employer's Voluntary Sub-Account on the first to happen of his:

當每一名僱員成員首次發生下列情況,其僱主自願性供款分戶口中的結存應可完全歸屬於該僱員成員:

- (a) attaining Normal Retirement Age; 達到正常的退休年齡;
- (b) attaining Early Retirement Age and the conditions in Rule 9 are met; 提早退休及符合第9條列明的條件;
- (c) termination of employment due to Total Incapacity and the conditions in Rule 12 are met; and 因長期無工作能力因而被終止僱用及符合第12條列明的條件;及
- (d) death.

死亡。

- 7.2 If an Employee Member ceases to be employed by his Employer in circumstances other than (a), (b), (c) and (d) of Rule 7.1 of this Participation Agreement, the balance of the Employer's Voluntary Sub-Account shall be vested in the Employee Member in accordance with the vesting scale set out in the Application Form completed and signed by the Employer. 除本參與協議第7.1 (a), (b), (c) 及(d)條以外的所有其他情况下,若僱員成員停止獲其僱主僱用,於僱主自願性供款分戶口中的結存應按照經由僱主填妥的申請書內訂明的歸屬比例歸屬予該僱員成員。
- 8. 8.1 Each VC Employee Member shall become fully vested with the balance of his VC Employer's Voluntary Sub-Account on the first to happen of his: 當每一名自願性供款僱員成員首次發生下列情況,其自願性供款僱主的自願性供款分戶口中的結存應可完全歸屬於該自願性供款僱員成員:
 - a) termination of employment due to Total Incapacity and the conditions in Rule 12 are met; and 因長期無工作能力因而被終止僱用及符合第12條列明的條件;及
 - (b) death. 死亡

Signed by the Employer

Name of signatory & title 簽署人姓名及職位

- 8.2 If a VC Employee Member ceases to be employed by his Employer in circumstances other than (a) and (b) of Rule 8.1 of this Participation Agreement, the balance of the VC Employer's Voluntary Sub-Account shall be vested in the VC Employee in accordance with the vesting scale set out in the Application Form completed and signed by the Employer. 除本參與協議第8.1 (a)及(b)條以外的所有其他情況下,若自願性供款僱員成員停止獲其僱主僱用,於自願性供款僱主的自願性供款分
 - 除本參與協議第8.1 (a)及(b)條以外的所有其他情况下,若自願性供款僱員成員停止獲其僱土僱用,於自願性供款僱土的自願性供款分戶口中的結存應按照經由僱主填妥的申請書內訂明的歸屬比例歸屬予該自願性供款僱員成員。
- 9. The Employer hereby acknowledges that 僱主確認:
 - (a) He/she is aware that YF Life Insurance International Ltd. ("YF Life") is the promoter of the Master Trust Scheme and its registered office is at 27/F, YF Life Tower, 33 Lockhart Road, Wanchai, Hong Kong. YF Life, the immediate holding company of the Trustee, is a registered principal intermediary with the Mandatory Provident Fund Schemes Authority (MPF Registration No.: IC000218) and is carrying on life insurance business.
 - 因僱主違反第4條所述的保證而引起的;或他/她已得悉萬通保險國際有限公司(下稱「萬通保險」)是集成信託計劃的推銷商,其註冊辦事處位於香港灣仔駱克道33號萬通保險大廈27樓。作為受託人的直屬控股公司,萬通保險是強制性公積金計劃管理局的註冊主事中介人(強積金中介人註冊號碼: IC000218),主要經營人壽保險業務。
 - (b) The registered subsidiary intermediary ("Intermediary") mentioned in the "MASS Mandatory Provident Fund Scheme Relevant Employer Application Form" ("Application Form"), completed for the Employer for the purpose of joining the Master Trust Scheme, is appointed by YF Life to distribute the Master Trust Scheme, and to invite and induce another person to make a material decision related to the matters set out in section 34F(5) of the Mandatory Provident Fund Schemes (Amendment) Ordinance 2012. 为参與集成信託計劃,替僱主填妥的「萬全強制性公積金計劃有關僱主申請書」(下稱「申請書」)當中提及的註冊強制性公積金附屬中介人(下稱「中介人」)是由萬通保險委任,負責分發集成信託計劃及邀請和誘使其他人士作出與2012年強制性公積金(修訂)條例第34F(5)條中所述的事項有關的重要決定。
 - (c) The Intermediary has provided his/ her business card to the Employer. 中介人已向僱主提供他/她的名片。
 - (d) In respect of the invitation and inducement mentioned in clause 9(b) hereinabove, the Intermediary will be compensated by way of commission and/or other monetary benefits which will not be different depending on the choices of the constituent funds made by the Employer. 就上述第9(b)條提及的邀請和誘使,中介人將會獲得佣金及/或其他金錢利益作為報酬,而該報酬不會因應僱主對成分基金的選擇而有差異。
- 10. This Participation Agreement shall be terminated in accordance with Rule 19 of this Deed. 按照有關契約第19條,本參與協議可被終止。
- 11. The Application Form completed and signed by the Employer shall form part of this Participation Agreement.
 申請書經僱主填妥並簽署後將構成本參與協議的一部份。
- 12. Subject to the approval of the Mandatory Provident Fund Scheme Authority, the Trustee can amend this Participating Agreement from time to time by way of notice to the Employer before any proposed amendments shall take effect.
 在強制性公積金計劃管理局給予批准的規限下,受託人可對本參與協議不時作出修改,但須在任何建議中的修訂向僱主發出通知。
- 13. This Participation Agreement shall be governed by the laws of Hong Kong. 本參與協議應受香港法律約束。

IN WITNESS whereof this Participation Agreement has been entered into the day and year first above written. 本参與協議已在本文件首頁所列的日期簽訂,以茲證明。

| 僱主簽署 | YF LIFE TRUSTEES LIMITED 萬通信託有限公司 |
|--|-----------------------------------|
| | |
| | |
| | |
| Authorized Signature with Company Chop 授權簽名及公司印章 | Authorized Signature(s) 授權人簽署 |
| | |

For and on behalf of 代表

PARTICIPATION AGREEMENT FOR RELEVANT EMPLOYER 有關僱主參與協議

| THIS PARTICIPATION AGREEMENT is made on | | | |
|---|-------------|--|--|
| 本協議於 | (日期)由下列雙方簽訂 | | |

BETWEEN 有關雙方:

- (1) YF LIFE TRUSTEES LIMITED, whose registered office is at 27/F, YF Life Tower, 33 Lockhart Road, Wanchai, Hong Kong (the "Trustee"); and 萬通信託有限公司,其註冊辦事處位於香港灣仔駱克道33號萬通保險大廈27樓(下稱「受託人」);及
- (2) The Applicant / Employer, whose name and address are given in the Application Form attached hereto (the "Employer"). 申請人僱主(下稱「僱主」),其名稱及地址填寫在計劃之申請書內。

RECITALS 敍文:

- (A) The Trustee is the Trustee of the Mass Mandatory Provident Fund Scheme (the "Master Trust Scheme"), which was established by a deed ("the Deed") dated 27 January 2000 made by the Trustee as amended from time to time.

 萬全強制性公積金計劃(下稱「集成信託計劃」)依據於2000年1月27日由其受託人以不時修改的有關契約(下稱「有關契約」)成立,受託人為集成信託計劃的受託人。
- (B) The Employer wishes to join the Master Trust Scheme in order to establish a retirement benefits scheme (the "Participating Scheme") for the benefit of its employees. 僱主希望參與集成信託計劃,用以成立為保障其僱員利益之退休保障計劃(下稱「參與計劃」)。

PROVISIONS 條文:

will be correct in all respects.

- 1. Unless otherwise stated, words and expressions used in this Participation Agreement (including the Recitals) shall have the meanings given to them in the Deed. 除非另有規定,本參與協議中使用的文字和表述(包括敍文)應具有有關契約所給予的涵義。
- 3. The Employer hereby covenants with the Trustee to comply with and be bound by the provisions of the Deed and this Participation Agreement and all applicable laws and regulations.
- 4. The Employer warrants that the information from time to time to be provided by the Employer in relation to contributions and as to the age, salary, length of service, benefits, Investment Mandates, Switching Instruction Forms and otherwise in relation to each Employee Member
 - 僱主保證,由僱主就供款不時提供的資料及關於每一名僱員成員的年齡、薪金、服務年期、福利、投資授權、轉換指令表格及其他資料在所有方面均是正確的。
- 5. Subject to the provisions of the Deed and this Participation Agreement, the Employer undertakes and agrees to hold the Trustee indemnified against any and all proceeding, costs, charges, liabilities and expenses occasioned by any and all actions, claims, demands or proceedings in connection with the Master Trust Scheme or the Participating Scheme either:

 在有關契約及本參與協議條款的規限下,僱主承諾且同意,對於任何和所有訴訟、訟費、收費、債項和開支,只要上述各項是因發生下列事

任有關突約及本麥與協議條款的規模下,僱主承諾且问息,對於任何和所有訴訟、訟質、収貨、俱項和用文,只要上述各項定因發生下外件而引起與集成信託計劃或本參與協議有關的任何和所有法律行動、索償、要求或法律訴訟所導致的,一概會向受託人作出賠償:

(a) arising out of the breach by the Employer of the warranty referred to in paragraph 4; or 因僱主違反第4條所述的保證而引起的;或

僱主現向受託人契諾遵守有關契約及本參與協議及所有適用法律和法規的規定並受其約束。

(b) as a result of any failure or omission on the part of the Employer to duly and punctually perform or observe any obligations pursuant to the Deed and this Participation Agreement or otherwise so far as they relate to the Employer and Employee Members of the Participating Scheme (whether they relate to the Employer and such Employee Members alone or together with another Employer and Employee Members of other Participating Schemes).

因僱主未能妥善及準時地履行或遵守依照有關契約及本參與協議之任何責任或與參與計劃之僱主及僱員成員相關之責任(不論該等責任 是否只與僱主及該等僱員成員有關、或是否同時與其他參與計劃下之另一僱主及僱員成員有關)所造成的失誤或遺漏。

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

僱主承諾且同意支付其在有關契約及本參與協議條款下應該支付的所有費用和開支。

7. 7.1 Each Employee Member shall become fully vested with the balance of his Employer's Voluntary Sub-Account on the first to happen of his:

當每一名僱員成員首次發生下列情況,其僱主自願性供款分戶口中的結存應可完全歸屬於該僱員成員:

- (a) attaining Normal Retirement Age; 達到正常的退休年齡;
- (b) attaining Early Retirement Age and the conditions in Rule 9 are met; 提早退休及符合第9條列明的條件;
- (c) termination of employment due to Total Incapacity and the conditions in Rule 12 are met; and 因長期無工作能力因而被終止僱用及符合第12條列明的條件;及
- (d) death.

死亡。

- 7.2 If an Employee Member ceases to be employed by his Employer in circumstances other than (a), (b), (c) and (d) of Rule 7.1 of this Participation Agreement, the balance of the Employer's Voluntary Sub-Account shall be vested in the Employee Member in accordance with the vesting scale set out in the Application Form completed and signed by the Employer. 除本參與協議第7.1 (a), (b), (c) 及(d)條以外的所有其他情况下,若僱員成員停止獲其僱主僱用,於僱主自願性供款分戶口中的結存應按照經由僱主填妥的申請書內訂明的歸屬比例歸屬予該僱員成員。
- 8. 8.1 Each VC Employee Member shall become fully vested with the balance of his VC Employer's Voluntary Sub-Account on the first to happen of his: 當每一名自願性供款僱員成員首次發生下列情況,其自願性供款僱主的自願性供款分戶口中的結存應可完全歸屬於該自願性供款僱員成員:
 - (a) termination of employment due to Total Incapacity and the conditions in Rule 12 are met; and 因長期無工作能力因而被終止僱用及符合第12條列明的條件;及
 - (b) death. 死亡。
 - 8.2 If a VC Employee Member ceases to be employed by his Employer in circumstances other than (a) and (b) of Rule 8.1 of this Participation Agreement, the balance of the VC Employer's Voluntary Sub-Account shall be vested in the VC Employee in accordance with the vesting scale set out in the Application Form completed and signed by the Employer.

除本參與協議第8.1 (a)及(b)條以外的所有其他情況下,若自願性供款僱員成員停止獲其僱主僱用,於自願性供款僱主的自願性供款分戶口中的結存應按照經由僱主填妥的申請書內訂明的歸屬比例歸屬予該自願性供款僱員成員。

- 9. The Employer hereby acknowledges that 僱主確認:
 - (a) He/she is aware that YF Life Insurance International Ltd. ("YF Life") is the promoter of the Master Trust Scheme and its registered office is at 27/F, YF Life Tower, 33 Lockhart Road, Wanchai, Hong Kong. YF Life, the immediate holding company of the Trustee, is a registered principal intermediary with the Mandatory Provident Fund Schemes Authority (MPF Registration No.: IC000218) and is carrying on life insurance business. 因僱主違反第4條所述的保證而引起的;或他/她已得悉萬通保險國際有限公司(下稱「萬通保險」)是集成信託計劃的推銷商,其註冊辦事處位於香港灣仔駱克道33號萬通保險大廈27樓。作為受託人的直屬控股公司,萬通保險是強制性公積金計劃管理局的註冊主事中介人(強積金中介人註冊號碼: IC000218),主要經營人壽保險業務。
 - (b) The registered subsidiary intermediary ("Intermediary") mentioned in the "MASS Mandatory Provident Fund Scheme Relevant Employer Application Form" ("Application Form"), completed for the Employer for the purpose of joining the Master Trust Scheme, is appointed by YF Life to distribute the Master Trust Scheme, and to invite and induce another person to make a material decision related to the matters set out in section 34F(5) of the Mandatory Provident Fund Schemes (Amendment) Ordinance 2012.
 為參與集成信託計劃,替僱主填妥的「萬全強制性公積金計劃有關僱主申請書」(下稱「申請書」)當中提及的註冊強制性公積金附屬中介人(下稱「中介人」)是由萬通保險委任,負責分發集成信託計劃及邀請和誘使其他人士作出與2012年強制性公積金(修訂)條例第34F(5)條中所述的事項有關的重要決定。
 - (c) The Intermediary has provided his/ her business card to the Employer. 中介人已向僱主提供他/她的名片。
 - (d) In respect of the invitation and inducement mentioned in clause 9(b) hereinabove, the Intermediary will be compensated by way of commission and/or other monetary benefits which will not be different depending on the choices of the constituent funds made by the Employer. 就上述第9(b)條提及的邀請和誘使,中介人將會獲得佣金及/或其他金錢利益作為報酬,而該報酬不會因應僱主對成分基金的選擇而有差異。
- 10. This Participation Agreement shall be terminated in accordance with Rule 19 of this Deed. 按照有關契約第19條,本參與協議可被終止。
- 11. The Application Form completed and signed by the Employer shall form part of this Participation Agreement.
 申請書經僱主填妥並簽署後將構成本參與協議的一部份。
- 12. Subject to the approval of the Mandatory Provident Fund Scheme Authority, the Trustee can amend this Participating Agreement from time to time by way of notice to the Employer before any proposed amendments shall take effect.

 在強制性公積金計劃管理局給予批准的規限下,受託人可對本參與協議不時作出修改,但須在任何建議中的修訂向僱主發出通知。

For and on behalf of 代表

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

IN WITNESS whereof this Participation Agreement has been entered into the day and year first above written. 本參與協議已在本文件首頁所列的日期簽訂,以茲證明。

| (唯土) 僉者 | TF LIFE TRUSTEES LIMITED 禹通信託有限公司 |
|---|-----------------------------------|
| | |
| Authorized Signature with Company Chop 授權簽名及公司印章 | |
| | |

Name of signatory & title 簽署人姓名及職位

Signed by the Employer



DIRECT DEBIT AUTHORISATION 直接付款授權書

Please complete and return this form to the party to be credited. 請填妥此授權書並交予收款之一方。

| We hereby authorize my/our below named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank ray receive from the beneficiary from time to time. 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. 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. 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. We agree that should there be insufficient funds in 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 shall have effect until further notice. We agree that any notice of cancellation or variation of this authorization shall have effect until further notice. 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 to make effect. We understand that all payments under this authorization are the contributions payment due under my/our MMF schemes with the above named beneficiary as specified as below. Bank No. | Name of party to be credited (The Beneficiary) 收款之一方(受益人) | | | | YF Life Trustees Ltd. – MPF | | | | | | | | | | | |
|--|--|---|---------|---|--|-----|-----|--------|-----|------|-------|----------|------|-----|-----|----------|
| A 子等。 I/We agree that should there be insufficient funds in my/our Bank account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect this authorization at any time on one week's written notice. This authorization shall have effect until further notice. This authorization shall be given at least two working days prior to the date on which such cancellation / variation is to make effect. I/We understand that all payments under this authorization are the contributions payment due under my/our MPF schemes with the above named beneficiary as specified as below. Bank Name 銀行名稱 Branch Name 分行名稱 Branch Name 分行名稱 My/Our Name as recorded on Statement/Passbook (Please complete in English) 本人/音等之数有分组(表示文章和 My/Our Address as recorded on Statement/Passbook (Please complete in English) 本人/音等在持事/存指上所起錄之名稱(請以英文填寫) My/Our Signature(s) 本人/音等之簽名 (Signature(s) must agree with your Bank's Record) (簽名必須與銀行账户檔案完全相同) Debtor's Reference - Scheme No. (without "MAS") plus Affiliated No. Name of Employer | account to that of the above named bene | eficiary in accordance with such instruct | | | | | | | | | | | | | 本人/ | /吾等 |
| ### Pink of the properties of the standard that all payments under this authorization as below. ### Bank Name 銀行名稱 Bank Name 銀行名稱 Bank Name 和 The | | - | otice o | | | | | | | | | | | | | |
| 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. This authorization shall have effect until further notice. This authorization shall have effect until further notice. *********************************** | | | | | | | | | | | 楚支 (| 或令 | 令現時≠ | と透支 | 增加) |),本 |
| 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 make effect. I/We understand that all payments under this authorization are the contributions payment due under my/our MPF schemes with the above named beneficiary as specified as below. Bank Name 銀行名稱 Branch Name 分行名稱 Branch Name 分行名稱 Branch No. 銀行編號 A/吾等之號有金號為 My/Our Address as recorded on Statement/Passbook (Please complete in English) 本人/吾等在结單/存摺上所紀錄之名稱 (請以英文填寫) My/Our Signature(s) 本人/吾等之簽名 (Signature(s) must agree with your Bank's Record) (爱名必須與銀行賬戶檔案完全相同) My/Our Signature(s) must agree with your Bank's Record) (爱名必須與銀行賬戶檔案完全相同) Debtor's Reference - Scheme No. (without "MAS") plus Affiliated No. Name of Employer | transfer hereby authorized, my/our Bank such transfer in which event the Bank ma | shall be entitled, in its discretion, not to y make the usual charge and that it may | o effec | t , | /吾等之 | 銀行有 | 權不. | 予轉賬, 釒 | | | | | | | | |
| 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 make effect. I/We understand that all payments under this authorization are the contributions payment due under my/our MPF schemes with the above named beneficiary as specified as below. Bank Name 銀行名稱 Branch Name 分行名稱 Branch No. 銀行編號 分行編號 分行編號 本人/吾等之賬戶號碼 My/Our Name as recorded on Statement/Passbook (Please complete in English) 本人/吾等在结單/存摺上所紀錄之名稱 (請以英文填寫) My/Our Signature(s) 本人/吾等之簽名 (Signature (s) must agree with your Bank's Record) (答名必須與銀行賬戶檔案完全相同) My/Our Signature (s) must agree with your Bank's Record) (答名必須與銀行賬戶檔案完全相同) Debtor's Reference - Scheme No. (without "MAS") plus Affiliated No. Name of Employer | This authorization shall have effect until fu | rther notice. | | 本授權書將繼續生效直至另行通知為止。 | | | | | | | | | | | | |
| payment due under my/our MPF schemes with the above named beneficiary as specified as below. Bank Name 銀行名稱 Branch Name 分行名稱 Branch No. 分行編號 本人/吾等之賬户號碼 My/Our Address as recorded on Statement/Passbook 本人/吾等在月結單/存摺上所紀錄之地址 My/Our Signature(s) 本人/吾等之簽名 (Signature (s) must agree with your Bank's Record) (簽名必須與銀行賬戶檔案完全相同) Debtor's Reference - Scheme No. (without "MAS") plus Affiliated No. Name of Employer | may give to my/our Bank shall be given | at least two working days prior to the o | | | | | | | | | | | | 知,須 | 於取消 | 肖/更 |
| Branch Name 銀行名稱 銀行名稱 銀行名稱 銀行編號 分行編號 本人/吾等之賬戶號碼 My/Our Name as recorded on Statement/Passbook (Please complete in English) 本人/吾等在結單/存摺上所紀錄之名稱 (請以英文填寫) My/Our Address as recorded on Statement/Passbook 本人吾等在月結單/存摺上所紀錄之地址 My/Our HKID Card/Passport No. / Business Registration No. / Certificate of Incorporation* 本人/吾等之香港身分證/護照號碼/商業登記 號碼/公司註冊證書號碼* Date 日期: (MM/DD/YY)(月/日/年) Debtor's Reference - Scheme No. (without "MAS") plus Affiliated No. Name of Employer | payment due under my/our MPF schemes | | ecified | | | | | | | | 自為支 | .付在 | 生債務ノ | 人參考 | 欄內歹 | 列明由 |
| 本人吾等在月結單/存摺上所紀錄之地址 本人吾等在月結單/存摺上所紀錄之地址 本人吾等在月結單/存摺上所紀錄之地址 本人吾等在結單/存摺上所紀錄之地址 本人吾等在結單/存摺上所紀錄之地址 My/Our HKID Card/Passport No. / Business Registration No./ Certificate of Incorporation* 本人/吾等之香港身分證/護照號碼/商業登記 统码/公司註册證書號碼* My/Our HKID Card/Passport No. / Business Registration No./ Certificate of Incorporation* 本人/吾等之香港身分證/護照號碼/商業登記 就碼/公司註冊證書號碼* | Bank Name 銀行名稱 | Branch Name 分行名稱 | | | | | | | | | | | · | | | 1 |
| (Signature (s) must agree with your Bank's Record) (簽名必須與銀行賬戶檔案完全相同) Registration No./ Certificate of Incorporation* 本人/吾等之香港身分證/護照號碼/商業登記 號碼/公司註冊證書號碼* Debtor's Reference - Scheme No. (without "MAS") plus Affiliated No. Name of Employer | (Please complete in English) | | | • | | | | | | • | assbo | _L ok | | | | <u> </u> |
| | (Signature (s) must agree with your Bank's Record) | | | | Registration No./ Certificate of Incorporation* 本人/吾等之香港身分證/護照號碼/商業登記 | | | | | | | | | | | |
| INTERVENTY OF STANDAR PROPERTY OF STANDARD PROPERTY | | | | | | | | | | | er | | | | | |
| | 月 (年 / 1 / 2 / 2) 1 1 1 1 1 1 1 1 1 | 10 1/10 上门/到 公 号/20月 加 | | | | | | ν | 正二乙 | 1111 | | | | | | |
| } | | | | | | | | | | | | | | | | |

^{*} Please delete whichever inapplicable. 請刪去不適用項目。



MPF Customer Declaration Form 強積金客戶聲明書

Note 注意:

- 1. This form is for subsidiary intermediaries' use only. Not applicable for enrollments, applications, switchings or redemptions conducted solely by customer himself or herself. 本表格只適用於附屬中介人,並不適用於經客戶自行處理的參與,轉移或贖回申請。
- 2. This declaration form is applicable to the conducting of regulated activities under the Guidelines on Conduct Requirements for Registered Intermediaries ("Guidelines") issued by Mandatory Provident Fund Schemes Authority ("MPFA"). 本聲明書適用於根據強制性公積金計劃管理局(下稱「積金局」)所發出的註冊中介人操守要求(下稱「指引」)下訂明之受規管活動。
- 3. Please complete in BLOCK LETTERS and tick ✓the appropriate boxes. 請用正楷填寫,並於適當的方格內加上「✓」號。
- 4. The completed declaration form must be returned with Transfer Form, Application Form for Non-regular Voluntary Contribution, Redemption Form Voluntary Contribution or fund switching form to YF Life Trustees Limited ("Trustee"). 請把填妥的聲明書連同轉移申請表,非規律性自願供款申請表格,自願性供款贖回表格或基金轉換表格一併寄交萬通信託有限公司(下稱「受託人」)。

| A. | Personal information 個人資料 | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Nam | ne of customer (English) : | | | | | | | | |
| 客戶 | 客戶姓名 (中文): | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| B. | Disclosure to the customer 向客戶披露 | | | | | | | | |
| 1. | YF Life Insurance International Ltd. ("YF Life") is the promoter of the Mass Mandatory Provident Fund Scheme ("Scheme") and its registered office is at 27th Floor, 33 Lockhart Road, Wanchai, Hong Kong. YF Life, the immediate holding company of the Trustee, is a registered principal intermediary with the MPFA (MPF Registration No.: IC000218) and is carrying on life insurance business. 萬通保險國際有限公司(下稱「萬通保險」)是萬全強制性公積金計劃(下稱「本計劃」)的推銷商,其註冊辦事處位於香港灣仔駱克道 33 號 27 樓。作為受託人的直屬控股公司,萬通保險是積金局的註冊主事中介人(強積金中介人註冊號碼: IC000218),主要經營人壽保險業務。 The registered subsidiary intermediary ("Intermediary") as referred to in this declaration form below is appointed by YF Life to distribute the Scheme, and to | | | | | | | | |
| | invite and induce another person to make a material decision related to the matters set out in section 34F(5) of the Mandatory Provident Fund Schemes (Amendment) Ordinance 2012. 在本聲明書提及的註冊強制性公積金附屬中介人(下稱「中介人」)是由萬通保險委任,負責分發本計劃及邀請和誘使其他人士作出與 2012 年強制性公積金(修訂)條例第 34F(5)條中所述的事項有關的重要決定。 | | | | | | | | |
| 3. | The Intermediary has provided his/ her business card to the customer (as referred to hereabove). 中介人已向上方提及的客戶提供他/她的名片。 | | | | | | | | |
| 4. | In respect of the invitation and inducement mentioned in clause 2 hereinabove, the Intermediary will be compensated by way of commission and/or other monetary benefits which will not be different depending on the choices of the constituent funds made by the customer. 就上述第 2 條提及的邀請和誘使,中介人將會獲得佣金及/或其他金錢利益作為報酬,而該報酬不會因應客戶對成分基金的選擇而有差異。 | | | | | | | | |
| | | | | | | | | | |
| Part | C to E to be completed by the Intermediary C 部至 E 部由中介人填寫 | | | | | | | | |
| | | | | | | | | | |
| Accordaffect 相缘 | Clients with special needs 常特別關注客戶 rding to the Guidelines, customers who are illiterate, with low level (primary level or below) of education, visually or otherwise impaired in a manner that to their ability to make the relevant key decision independently are regarded as clients with special needs. 指引,任何有語文困難、低學歷(小學程度或以下) 、有視力或其他肢體受損的客戶,而該等情況影響其獨立地作出強積金相關的重要決定的能力,均被視作「需關注客戶」。 According to The Guidelines, issued under section 6H of the Mandatory Provident Fund Schemes Ordinance, a registered intermediary should provide extra care of, and support for, clients with special needs during the sales and marketing process relating to the making of a key decision. A key decision for this purpose refers to one of the following decisions: 根據基於強制性公積金計劃條例第 6H 條而制訂的指引,強積金中介人在進行有關強積金的重要決定的銷售或推廣時,需額外謹慎照顧「需特別關注客戶」及提供支援。所謂「有關強積金的重要決定」,是指以下任何一項: (a) choosing a particular constituent fund; 選擇某一特定的成分基金; making a transfer that would involve a transfer out of a guaranteed fund; 作出轉移時涉及從現有強積金賬戶轉出保證基金; (d) making how much voluntary contributions into a particular registered scheme or a particular constituent fund. 向某一特定的註冊計劃或某一特定的成分基金注入何等金額之自願性供款。 | | | | | | | | |
| Ш | Not applicable. The customer is not a client with special needs. 不適用。客戶並不是「需特別關注客戶」。 (Proceed to Section D. 下往 D 部。) | | | | | | | | |
| | As a customer with special needs, the Intermediary has offered the customer the following options and the customer's decision on the options is marked as follow. 作為「需特別關注客戶」,中介人已向客戶提供下列選擇,而客戶對於該選擇的決定如下。 to be accompanied by a companion to witness the relevant sales process and constituent fund selection process; 由一位朋友見證相關銷售及成分基金選擇過程: | | | | | | | | |
| | Name of witness 見證人姓名 Signature of witness 見證人簽署 Date 簽署日期 to have an additional member of staff to witness the relevant sales process and constituent fund selection process; or 由額外一名職員見證相關銷售及成分基金選擇過程;或 | | | | | | | | |

Signature of staff 職員簽署

Fax 傳真: 2919 9233

Name of staff 職員姓名

the customer decides not choosing the aforesaid choices by his/her own discretion. 客戶自行決定不選取上述選擇。



MPF Customer Declaration Form 強積金客戶聲明書

| D. 1 | Transfer into the guaranteed fund provided under the Scheme ("Guaranteed Fund") 將權益轉入本計劃內的保證基金(「保證基金」) | | | | | | | |
|-------------|--|--|--|--|--|--|--|--|
| | Not applicable. Customer does not transfer fund into the Guaranteed Fund. 不適用。客戶沒有將權益轉入保證基金內。 <i>(Proceed to Section E. 下往 E 部。)</i> | | | | | | | |
| | Customer understands and confirms that the Intermediary has: 客戶明白及確認中介人已: (i) explained the terms and conditions of the Guaranteed Fund with a particular focus on the qualifying conditions; 解釋保證基金的條款及條件,特別是附帶條件; (ii) explained the circumstances when the customer will or will not meet the qualifying condition of the Guaranteed Fund; | | | | | | | |
| | 解釋在基麼情況下客戶會或不會符合保證基金的附帶條件; (iii) explained the greater counterparty or credit risks associated with the guarantees based on an insurance policy as compared to those based on a unit trust. 解釋與其他以單位信託為基礎的基金相比,屬保險單形式的保證基金涉及較大交易對手失責風險或信貸風險。 | | | | | | | |
| E. | Transferring out of guaranteed funds 從現有強積金賬戶轉出保證基金 | | | | | | | |
| | Not applicable. Customer does not currently have investments in any guaranteed funds. 不適用。客戶現時沒有投資於任何保證基金。 (Proceed to Section F. 下往F部。) | | | | | | | |
| | Customer understands and confirms that the Intermediary has: 客戶明白及確認中介人已: (i) warned the customer that the transfer of the accrued benefits out of that guaranteed fund may cause some or all of the guarantee conditions not being satisfied, thus resulting in the loss of the guarantee. 警告客戶從保證基金轉出累算權益可以引致部份或全部保證條件不符合,因而喪失保證的回報; (ii) advised the customer to check the offering document of his or her original scheme or consult his or her trustee before transferring his or her accrued benefits out of that guaranteed fund. 從保證基金轉出其累算權益前,建議客戶查閱其原有計劃的要約文件,或向其受託人查詢; (iii) informed the customer the consequences of the termination of his/her investment in the guaranteed fund. The customer confirms that he or she understands the consequences of such termination. 告之客戶終止投資於保證基金的後果。客戶確認他或她明白上述終止的後果。 | | | | | | | |
| _ | | | | | | | | |
| F. | Acknowledgment and Signature 確認及簽署 | | | | | | | |
| 1. | undersigned customer understands and confirms that: During sales process and constituent fund selection process, the Intermediary has not given any advice on constituent fund to the customer . 在銷售及成分基金選擇過程期間, 中介人沒有向客戶提供任何成分基金方面的意見 。 | | | | | | | |
| 2. | The information given in this form / and its attachment (if any) is correct and complete. 本表格 / 及隨附文件(如有)所提供的資料均屬正確無訛且並無缺漏。 | | | | | | | |
| 3. | | | | | | | | |
| 4. | The customer understands the timeframe involved in the transfer process and there will be a time lag during which the accrued benefits (if any) will not be invested. In any case, the customer has the right to seek professional financial advice when in doubt. 客戶明白轉移手續需時處理,期間將令累算權益(如有) 出現投資真空期。無論如何,有關投資方面的疑問,客戶有權尋求專業投資意見。 | | | | | | | |
| 5. | The customer understands the rationale related to transfer or enroll in the MASS MPF Scheme. The advice given to the customer is based on the rationale of *scheme and fund choices/ fund management fees/ employer and member services/ other (if any)(please specify). 客戶明白有關轉移或參與萬全強積金計劃的意見之理據。向客戶提供的意見乃基於*計劃及基金選擇/基金管理費/ 僱主及成員服務/ 其他(如有)(請註明)的理據。 | | | | | | | |
| | | | | | | | | |
| | x | | | | | | | |
| - | Signature of customer 客戶簽署 Date 日期 | | | | | | | |
| | | | | | | | | |
| | X Signature of Intermediary 中介人簽署 Consultant Code 顧問編號 Date 日期 | | | | | | | |
| | | | | | | | | |

1.

* please delete if inappropriate 請刪除不適用者
The copy of this form will be provided to the customer (as referred to the hereabove). 本表格的副本將會提供給上方提及的客戶。



MASS Mandatory Provident Fund Scheme 萬全強制性公積金計劃

Application Form for Relevant Employer (Supplementary Information) 有關僱主申請書(補充資料)

| Please provide the following information together with the Application Form 勃達의子列資料一併追交申請書: Employer Details (主文解) - Business Registration Certificate Copy 高東安之深刻未 - Certificate of Incorporation Copy 全司出榜後之祖未 - Date of Incorporation 公司证明台灣。 - Place of Incorporation of Place Place - Place of Incorporation of Place Place - Place of Incorporation of Place Place - Place of Association Application of Place Place - Place of Incorporation of Place Place - Place of Incorporation of Place Place - Place of Incorporation of Place Place - Place of Place Place Place - Place of Place Place Place - Place of Place Place Place Place - Place of Place Place Place - Place of Place Place - Place Place Place - Place Place Place - Place Place Place - Place - Place Place - Place Place | Nar | me of Employer 僱主名稱: | | | | | | | | | | |
|---|---|---|---|---|---|---|--|--|--|--|--|--|
| 1. Business Registration Certificate Copy 第章 生態を対す。 2. Certificate of Incorporation スタリ 計画機能 書前末 (MM/DD/YY) - Date of Incorporation 公司 計画機能 書前末 (MM/DD/YY) - Place of Incorporation 公司 計画機能 (MM/DD/YY) - Place of Incorporation 公司 計画機能 (MM/DD/YY) - Place of Incorporation of Option with (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Incorporation of Option of Miles (MM/DD/YY) - Place of Miles (MM/DD/YY | Ple | ase provide the following information toget | her with the Application Fo | 'm 請連同' | 下列資料一併 | :遞交申請書: | | | | | | |
| Date of Incorporation Copy 会 引き附近者副第: | Em | | | | | | | | | | | |
| - Date of Incorporation 公司は南日朝: (MMODDYY) (月/日/年) - Place of Incorporation 公司は南日朝: (MMODDYY) (月/日/年) - Place of Incorporation 公司的本程大郎 - Place of Incorporation Owner(s) のからいでは、 Place of Incorporation Owner(s) といっていていていていていていていていていていていていていていていていていていて | | | | | | | | | | | | |
| - Place of Incorporation 公司注册社: 3. Article of Association 公司注册社: 3. Article of Association 公司注册社: 4. Details of the ownership and control structure (with beneficial owners > 25% interests)* 機能支票構表(持有 25%以上共列的質質解析)* (Personal particular of beneficial owners) who own(s) 25% interests or above of the company may be required to provide, if necessary 並初 ・ 持有 25%以上共列的質質解析人的测定解析人的现象,并有 25%以上共列的質質解析人的测定解析,从可能是有一个现在的影响,是一个现在的影响,是一个现在的影 | 2. | Certificate of Incorporation Copy 公司註 | 冊證書副本 | | | 0.000 | | | | | | |
| 3. Article of Association 公司的幸程夫例 4. Details of the ownership and control structure (with beneficial owners > 25% interests)* 機株文装構表(持有25%及以上判別的實質結構人。 (Personal particular of beneficial owners) who own(s) 25% interests or above of the company may be required to provide, if necessary | | - Date of Incorporation 公司註册日期 | : | | | | | | | | | |
| Letails of the ownership and control structure (with beneficial owners > 25% interests)* 機能文際構造、代育な50% 以上が開砂資資施方人) 機能文際機力・特別を対象が、上が開砂資資施方人) Personal particular of beneficial owner(s) who own(s) 25% interests or above of the company may be required to provide, if necessary か 20 m 20 | | - Place of Incorporation 公司註册地: | | | | | | | | | | |
| 機能と無線表(特有 25%表以上対例的質質結構人)。 (Personal particular of beneficial owner(s) who own(s) 25% interests or above of the company may be required to provide, if necessary か速度・特定できた。 *********************************** | | | | | | | | | | | | |
| 技術人等書名学、美身合短町文井核質副本及相間董事會決議 Items 2、3、4 and 5 above are not applicable for Sole Proprietorship or Partnership 上述 2・3・4 及 5 項不達用外籍資整等表合状經券公司 The list should be signed by a director or the company secretary to confirm the correctness 名 早須由安学及公司本書書 水 諸男加紙模菓) Name | 4. | 機構之架構表(持有 25%或以上利潤的實質擁有人)* (Personal particular of beneficial owner(s) who own(s) 25% interests or above of the company may be required to provide, if necessary | | | | | | | | | | |
| Temporation | 5. | | | gner(s) ar | nd relevant bo | pard resolution | | | | | | |
| Name 姓名 1. 2. 3. Sole Proprietorship or Partnership — List of Owner(s) 獨責總管或合依總管公司 — 擁有人名草 (please use separate sheet(s), if necessary か有意美・諸方か紙祭集第) Name HKID Card / Passport No.* 香港身份証/護期後期 | | ns 2, 3, 4 and 5 above are not applicable f | or Sole Proprietorship or Pa | | | | | | | | | |
| 大名 香港身份遊/護照號馬 1. 2. 3. Sole Proprietorship or Partnership – List of Owner(s) 獨責継巻表合枚継巻公司 – 擁有人名草 (please use separate sheet(s), if necessary 女有意妻・諸男加級張模窩) Name | Co | rporation – List of Directors 法人公司 – | 董事名單 (please use sepa | arate shee | et(s), if nece | | | | | | | |
| 2. 3. Sole Proprietorship or Partnership – List of Owner(s) 獨責健養或合依健養公司 – 擁有人名享 (please use separate sheet(s), if necessary 如有需要,排分加熱機構第) Name HKID Card / Passport No.® 香港身份證/護眼読嗎® 回籍 (生址 名) 相談のはいました。 日本語のは、日本語の | | | | | | | | | | | | |
| Sole Proprietorship or Partnership – List of Owner(s) 獨資經營或合伙健營公司 – 擁有人名草 (please use separate sheet(s), if necessary 如有意美・排另加紙機模象) Name | 1. | | | | | | | | | | | |
| Sole Proprietorship or Partnership — List of Owner(s) 獨賣經營或合伙總營公司 — 擁有人名單 (please use separate sheet(s), if necessary 如有需要,请另加紙張據了 Nationality Residential Address | 2. | | | | | | | | | | | |
| Residential Address | 3. | | | | | | | | | | | |
| 性名 香港身份證/護照號碼 國籍 住址 The information Collection Statement 改集個人資料學明 The information provided by Participating Employers or Members of the Scheme on this application form or other forms prescribed by YF Life Trustees Limited ("Trustee") and details of any transactions or dealings by such Participating Employers or Members of the Scheme on this application form or other forms prescribed by YF Life Trustees Limited ("Trustee") and details of any transactions or dealings by such Participating Employers or Members may be held by the Trustee for the purposes of processing their participation in the Scheme and providing administrative, computer or any other services as may be considered necessary in connection with the MPF operation, and may also be used for observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure or notification requirements to which any recipient of the data is subject) and for providing information for the dispatch of information on MPF products or services from the Trustee. Please note that failure to provide any information requested by the Trustee may result in the Trustee to any of the following persons (whether within or outside Hong Kong) for them to carry out their governmental / regulatory bodies (whether within or outside Hong Kong) for them to carry out their governmental / regulatory bodies whether within or outside Hong Kong) for them to carry out their governmental / regulatory bodies and law enforcement agencies; and (3) crime prevention organisations and their members/participants; and (4) service providers and selected persons which are under a duty of confidentiality to the Trustee. Participating Employers and Members have a right to require access to and correction of their company or personal data not be used for direct marketing purposes by giving written notice to the Trustee at the address at 27fF, 31 Lockhart Road, Wanchai, Hong Kong, The Trustee may charge a reasonable fee for the processing of such request. \$\phi \t | | | · 如有需要,請另加紙張填Z | (7) | | • | | | | | | |
| # Must provide certified ID document copy 需提供身份證明文件核實副本 Personal Information Collection Statement 收集個人責料學明 The information provided by Participating Employers or Members of the Scheme on this application form or other forms prescribed by YF Life Trustees Limited ("Trustee") and details of any transactions or dealings by such Participating Employers or Members may be held by the Trustee for the purposes of processing their participation in the Scheme and providing administrative, computer or any other services as may be considered necessary in connection with the MPF operation, and may also be used for observing any legal, governmental or requisitor of any relevant jurisdiction (including any disclosure or notification requirements to which any recipient of the data is subject) and for providing information for the dispatch of information on MPF products or services from the Trustee. Please note that failure to provide any information requested by the Trustee may result in the Trustee not being able to process your participation in the Scheme. Your personal information collected by or held by the Trustee may be transferred or disclosed by the Trustee not being able to process your process your participation in the Scheme. Your personal information collected by or held by the Trustee may result in the Trustee and the interpretation of the dispatch of information on the Scheme. Your personal information collected by or held by the Trustee Part on the Trustee Participating Employers and Members functions: (1) The Trustee group companies and their associated / affiliated companies; (2) governmental / regulatory bodies and law enforcement agencies; and (3) crime prevention organisations and their members/participants; and (4) service providers and selected persons which are under a duty of confidentiality to the Trustee. Participating Employers and Members have a right to require access to and correction of their company or personal data or to request that their company or personal data not be used for direct mark | | | | | | | | | | | | |
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| Personal Information Collection Statement 改集個人資料學明 The information provided by Participating Employers or Members of the Scheme on this application form or other forms prescribed by YF Life Trustees Limited ("Trustee") and details of any transactions or dealings by such Participating Employers or Members may be held by the Trustee for the purposes of processing their participation in the Scheme and providing administrative, computer or any other services as may be considered necessary in connection with the MPF operation, and may also be used for observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure or notification requirements to which any recipient of the data is subject) and for providing information for the dispatch of information on MPF products or services from the Trustee. Please note that failure to provide any information requested by the Trustee may result in the Trustee not being able to process your participation in the Scheme. Your personal information collected by or held by the Trustee may be transferred or disclosed by the Trustee to any of the following persons (whether within or outside Hong Kong) for the purposes as specified above or to governmental / regulatory bodies (whether within or outside Hong Kong) for them to carry out their governmental / regulatory functions: (1) The Trustee group companies and their associated / affiliated companies; (2) governmental / regulatory bodies and law enforcement agencies; and (3) crime prevention organisations and their members/participants; and (4) service providers and selected persons which are under a duty of confidentiality to the Trustee. Participating Employers and Members have a right to require access to and correction of their company or personal data or to request that their company or personal data not be used for direct marketing purposes by giving written notice to the Trustee at the address at 27/F, 33 Lockhart Road, Wanchai, Hong Kong, The Trustee may charge a reasonable fee | 2. | | | | | | | | | | | |
| The information provided by Participating Employers or Members of the Scheme on this application form or other forms prescribed by YF Life Trustees Limited ("Trustee") and details of any transactions or dealings by such Participating Employers or Members may be held by the Trustee for the purposes of processing their participation in the Scheme and providing administrative, computer or any other services as may be considered necessary in connection with the MPF operation, and may also be used for observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure or notification requirements to which any recipient of the data is subject) and for providing information for the dispatch of information on MPF products or services from the Trustee. Please note that failure to provide any information requested by the Trustee may result in the Trustee not being able to process your participation in the Scheme. Your personal information collected by or held by the Trustee may be transferred or disclosed by the Trustee on the only of the following persons (whether within or outside Hong Kong) for the purposes as specified above or to governmental / regulatory bodies (whether within or outside Hong Kong) for them to carry out their governmental / regulatory socials (and their members/participants; and (4) service providers and selected persons which are under a duty of confidentiality to the Trustee. Participating Employers and Members have a right to require access to and correction of their company or personal data or to request that their company or personal data not be used for direct marketing purposes by giving written notice to the Trustee at the address at 27/F, 33 Lockhart Road, Wanchai, Hong Kong. The Trustee may charge a reasonable fee for the processing of such request. \$\$ \$98.4.\$\$ \$9 | # M | ust provide certified ID document copy 需都 | 是供身份證明文件核實副本 | <u> </u> | | | | | | | | |
| | The trans composed from the second of art MPF partial outsing function or a second from the s | information provided by Participating Employers or Mensactions or dealings by such Participating Employers or I butter or any other services as may be considered necesiny relevant jurisdiction (including any disclosure or notification in the Scheme. Your personal information collede Hong Kong) for the purposes as specified above or tions: (1) The Trustee group companies and their assinisations and their members/participants; and (4) service a right to require access to and correction of their compare to the Trustee at the address at 27/F, 33 Lockhart Roace 维主或計劃成員在本申請表或在萬通信託有限公司(下稱電腦或其他因強請企憲/問下必須提供受託人所需的個人責務而向以下任何一方(不論在香港或海外)轉移或透露由罪組織及其會員/參與者;及(4)與受託人有保密協議的)接促銷用途,並呈交至香港灣仔駱克道33號27樓。處理上tatements made in all parts of the application form are fifthere is any change in the information provided (including the services are serviced in the information provided (including the services are the services or any change in the information provided (including the services are the services are the services or any change in the information provided (including the services are the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information provided (including the services or any change in the information | nbers of the Scheme on this applicate the same on the same of the Scheme on this application with the MPF operation requirements to which any refailure to provide any information roted by or held by the Trustee may to governmental / regulatory bodie vocated / affiliated companies; (2) exproviders and selected persons was any or personal data or to request of d, Wanchai, Hong Kong. The Truste in the selected persons was any or personal data or to request of d, Wanchai, Hong Kong. The Truste in the selected persons was any or personal data or to request of d, Wanchai, Hong Kong. The Truste in the selected persons was any or personal data or to request of d, Wanchai, Hong Kong. The Truste in the selected persons was all a selected persons was all a selected persons was all the selected pers | e for the purp ration, and m ecipient of the equested by the betransferred where we will be transferred to the following governmenta which are und hat their comple e may charge e may charge 是 是 what the purp e may charge 是 what the purp e may charge 是 what the purp e may charge e may charge the purp e may charge e | oses of processir ay also be used if e data is subject) he Trustee may red or disclosed by thin or outside H I / regulatory boder a duty of confipany or personal a a reasonable fee o 交易详情可由受收更正其公司 使期及更正其公司 tedge and belief soon as reasonable | ng their participation in the Scheme and providing administrative, for observing any legal, governmental or regulatory requirements and for providing information for the dispatch of information on result in the Trustee not being able to process your process your y the Trustee to any of the following persons (whether within or long Kong) for them to carry out their governmental / regulatory dies and law enforcement agencies; and (3) crime prevention identiality to the Trustee. Participating Employers and Members data not be used for direct marketing purposes by giving written of for the processing of such request. 此人保留,以作為批核参加本計劃申請之用途,並可用作提供行取到的資料披露及通知規定);及提供受託人用作發放其強積金其關聯或相關公司;(2)政府部門或監管機構和執法機構;及(3) 引或個人資料,關下可致函受託人要求其公司或個人資料不得使用whether or not they are in my/our handwriting. I/We undertake by practicable. | | | | | | |

Authorized Signature & Company Chop 授權人簽署及公司蓋章

Date 日期