

1. Details of Associate 公司資料

Name of Employer

僱主名稱

Address 地址

Income Tax Contributor No.

所得補充稅納稅人編號

Business Registration No.

商業登記號碼

Contact Person

聯絡人

Email Address

電郵信箱

(Please provide a
photocopy 請附上影印本)

Industry Type

行業類別

Tel. No.

電話

Fax No.

傳真

Interface between Joint Provident Fund Scheme and Private Pension Scheme? Yes 是 No 否

公積金共同計劃與私人退休金計劃銜接?

If yes, the Management Company of Private Pension Fund:

如是，私人退休金計劃基金管理實體名稱

Scheme Number of Private Pension Fund:

私人退休金計劃編號

2. Scheme Effective Date :

計劃生效日期

First day of next month after the approval of Social Security Fund

社保基金批准的翌月首日

3. Pension Funds and Contribution Investment Allocation 退休基金及供款的投放分配:

The contribution allocation percentage should be at least 5% or its multiple and equal to 100% in total

選取的退休基金的供款投放的分配比例應至少為百分之五或其整倍數，總百分比必須為 100%

	Contribution Allocation Percentage	
	Employer Portion	Employee Portion
	僱主部分	僱員部分
YF Life Capital Conservative Fund 萬通保險保守基金	_____	_____
YF Life Global Growth Fund 萬通保險環球增長基金	_____	_____
YF Life Global Balanced Fund 萬通保險環球均衡基金	_____	_____
YF Life Global Stable Fund 萬通保險環球穩定基金	_____	_____
	100%	100%

Do you allow your Employee(s) to change the Employer Portion of the above Contribution Investment Allocation?

閣下是否准許僱員更改上述僱主部分供款的投放分配?

Yes 是 No 否

4. Contribution 供款 :

Base on the basic standard of "Non-mandatory Central Provident Fund System":

(i) Contributions calculation is based on the employee's monthly basic wage

(ii) 5% contribution rate for both employer and employee

按"非強制性中央公積金制度"的基本標準:

(i) 供款以僱員每月的基本工資為計算基礎

(ii) 供款比率為僱主及僱員各 5%

Or 或

More favourable terms for employees:

(i) Contributions calculation is based on the employee's _____ (e.g. basic salary plus other allowances such as tips, commission, etc.)

(ii) Contribution rate for employer _____ and employee _____ (should be more than 5%)

對僱員更有利的條款:

(i) 供款以僱員基本工資外加入其他項目 _____ (例如: 底薪加其他津貼, 如茶資、佣金等)

(ii) 供款比率為僱主 _____ 及僱員 _____ (需高於 5%)

5. Vesting Schedule* 權益歸屬比率* :

Employee's Contribution Time# (Year) 僱員的供款時間# (年)	Vesting Percentage 歸屬百分比
	<input type="checkbox"/> Basic standard 基本標準
1	0%
2	0%
3	30%
4	40%
5	50%
6	60%
7	70%
8	80%
9	90%
10 or above 或以上	100%

<input type="checkbox"/> More favourable terms for employees 對僱員更有利的條款	<input type="checkbox"/> More favourable terms for employees 對僱員更有利的條款
	10%
	20%
Or 或	30%
	40%
	50%
	60%
	70%
	80%
	90%
	100%

If a Employee ceases to be employed, the unvested benefit will be used to offset the Employer's future contribution.
如僱員被終止受僱，未歸屬的權益將用作抵銷僱主將來的供款。

* If more favourable terms for employees will be used, please specify in separate sheet (e.g. the employee terminates the labour relationship in the some circumstances, he/she can obtain all the contribution balance from the employer) 如採用對僱員較為有利的條款，請另行以書面通知（例如僱員在某些情況終止勞動關係，可取得僱主的全部供款結餘）

the contribution time will be determined in accordance with article 35 of Law no. 7/2017, if more favourable terms for employees will be used, please specify in separate sheet 供款時間按第 7/2017 號法律第 35 條規定的方式計算，如採用對僱員較為有利的計算方式，請另行以書面通知

6. Contribution Payment Method : By Cheque
支付供款方法 支票

7. United States Government's Foreign Account Tax Compliance Act (FATCA)
美國政府《外國帳戶稅務合規法案》

Please complete the Supplementary Form for Collective Membership. 請填寫集體成員計劃補充表格。

8. Tax Residency 稅務居民身分

Please complete the Tax Residency Self-Certification Form (Individual). 請填寫稅務居民自我證明表格(個人)。

DECLARATION 聲明:-

Duty of Disclosure 提供資料責任

I/We declare and agreed that (1) all information provided by me/us are full, complete and true to the best of my/ our knowledge and belief; (2) if there is any subsequent change to the information provided, I/we undertake to notify YF Life Insurance International Ltd. ("the Company") as soon as possible.

本人/我們謹此聲明及同意(1)本人/我們提供的所有資料均為完整、正確及真實；(2)若本人/我們所提供的資料有任何更改時，本人/我們確保儘快通知萬通保險國際有限公司(「貴公司」)有關的更改。

Acknowledgement and Agreement relating to Reporting and Withholding Obligations under Applicable Requirements

適用的規定下之申報及預扣責任聲明及協議

I/We acknowledge that the Company may be obliged to comply with any applicable (local or overseas) requirements of whatever nature prescribed by any (local or overseas) authorities (regulatory, self-regulatory or otherwise) (the "Authorities" and each an "Authority"); and/or any (present or future) commitments or agreements with any Authority; and as amended from time to time (the "Applicable Requirements").

本人/我們確認貴公司須遵從由(本地或海外)任何機構(包括監管機構、行業監管機構或其他，以下簡稱「監管機構」)不時頒布及修訂適用的任何性質的要求，或與任何監管機構(現在及將來)的承諾或協議(以下簡稱「適用的規定」)。

In this connection, notwithstanding anything contained in this form or any membership or agreements between me/us and the Company, I/we irrevocably agree to provide the Company with all assistance and/or to waive all applicable (legal, regulatory or otherwise) restrictions as may be necessary to enable the Company to comply with the Applicable Requirements. In particular (but without limitation), I/we irrevocably agree that:

因此，儘管本表格或任何成員計劃或任何其他由本人/我們和貴公司之間所訂協議有任何其他不同條款，本人/我們不可撤回地同意向貴公司提供一切協助及/或撤銷所有適用限制(無論是法律、法規或其他限制)，以促成貴公司能遵從適用的規定。更重要的是(但不限於此)本人/我們不可撤回地同意：

(a) I/We will provide the Company with further information and/or prescribed documents within such time as may be required by the Company;

本人/我們於貴公司要求的時限內向貴公司提供進一步資料及/或指定文件；

(b) The Company may disclose to any Authority (such disclosure may be effected via the Head Office of the Company if applicable) any information about (i) any of my/our membership(s) (whether the membership(s) is/are in force or otherwise); and/or (ii) me/us and any Consenting Person as defined hereinafter;

貴公司可向任何監管機構披露(此等披露可以透過貴公司的總公司進行)任何有關(i)本人/我們任何成員計劃資料(無論該等成員計劃是否生效)；及/或(ii)本人/我們或任何同意人士(見下述定義)的資料；

(c) The Company may withhold any payments otherwise payable to me/us or to any Consenting Person as defined hereinafter (and pay the withheld amounts to the relevant Authorities if required); and

貴公司可預扣任何應支付予本人/我們或任何同意人士(見下述定義)的款項(並在有必要的情況下向有關監管機構支付該等被預扣之款項)；及

- (d) If I/we fail to comply with point (a) above or if any information or document provided is not up-to-date, accurate or complete, the Company may terminate any of my/our membership(s) and the amount that the Company will pay upon termination shall be calculated pursuant to the applicable terms and conditions of the membership(s) as if the membership(s) has/have been terminated by me/us on the date of the termination.

若本人/我們未能遵從上述(a)項或所提供的並非最新的、準確的或完整的資料或文件，貴公司可終止本人/我們之任何成員計劃，該等成員計劃將被當作於終止日當天被本人/我們終止，並根據成員計劃的條款計算所有因成員計劃終止貴公司所需支付之款項。

"Consenting Person" in relation to a retirement pension scheme means any person who is / will be entitled to receive a benefit under the membership(s). I/We confirm that I/we have obtained the requisite consent and agreement from each Consenting Person to enable the Company to comply with the Applicable Requirements and to exercise the rights and powers of the Company set out above.

「同意人士」指就退休金計劃而言，任何人士(於現在或將來)可根據成員計劃收取款項。本人/我們確認本人/我們已取得每位同意人士事先的許可和協議，以使貴公司能遵從適用的規定，及以使貴公司能行使載於上文的權利及權力。

The Company shall not be liable for any costs, loss or damages that I/we or any Consenting Person may incur because of the Company taking any actions for compliance with the Applicable Requirements. If I/we have any doubt on the impact of the aforesaid on me/us or my/our legal or tax position, I/we should seek independent professional advice.

貴公司將不會向本人/我們或任何同意人士承擔任何可能因貴公司採取任何行動以遵從適用的規定所產生的費用、損失或損害。如果本人/我們因上述所載而對本人/我們或本人/我們的法律或稅務狀況而產生的影響有任何疑問，本人/我們應尋求獨立專業意見。

This section shall survive the termination and cancellation any of my/our membership(s).

本部份所載之條款將於任何本人/我們的保單終止和取消後繼續適用。

Personal Information Collection Statement 收集個人資料聲明

The personal information provided by the Employee or Employer of the Scheme (defined below), collected by or held by YF Life Insurance International Limited ("YF Life") ("your personal information") may be used for the purposes of administration and/or management of or in connection with the contributions or accrued benefits or account in respect of the participation of the Employee or Employer ("your participation") in the Macau non-Mandatory Provident Fund; providing computer and any other services in connection with the Macau non-Mandatory Provident Fund; dispatch of information in relation to Macau non-Mandatory Provident Fund; data matching; investigation or prevention of crime; or fulfilling legal or regulatory requirements. Please note that failure to provide any information requested by YF Life may result in YF Life not being able to process or maintain your participation in the Macau non-Mandatory Provident Fund. Transfer of Personal Information, your personal information may be transferred or disclosed by YF Life to any of the following persons (whether within or outside Macau) for the purposes as specified above or to governmental/regulatory bodies (whether within or outside Macau) for them to carry out their governmental/regulatory functions, relevant Employer; YF Life group companies and their associated/affiliated companies; financial institutions, Macau non-Mandatory Provident Fund service providers and intermediaries; industry associations/federations and their members; governmental/regulatory bodies and law enforcement agencies; crime prevention organisations and their members/participants; and service providers and selected persons which are under a duty of confidentiality to YF Life. Access to or Correction of Personal Information, you have the right to access to, and to correct, any of your personal information held by YF Life by writing to our Personal Data Protection Officer at 27/F, 33 Lockhart Road, Wanchai, Hong Kong. YF Life may charge a reasonable fee for the processing of such request.

萬通保險國際有限公司(下稱「萬通保險」)所收集或持有的由僱主及/或僱員提供的個人資料("閣下之個人資料")可能會被用於下列目的，就僱主及/或成員參與澳門非強制性中央公積金，處理僱主及/或成員的供款或累算權益或澳門非強制性中央公積金戶口有關的行政事宜及/或管理；根據適用之法例就澳門非強制性中央公積金提供電腦或其他服務；提供有關澳門非強制性中央公積金產品及/或服務的資訊；資料核對；偵測或防止罪行；或符合法律或合規要求。請注意，閣下必須提供萬通保險所需的閣下之個人資料，否則，萬通保險將不能處理或管理閣下參與澳門非強制性中央公積金。轉移個人資料，萬通保險可能為達到上述目的或讓政府/監管機構(不論在澳門或海外)執行其職務而向以下任何一方(不論在澳門或海外)轉移或透露由萬通保險收集或持有屬於閣下之個人資料：有關之僱主；萬通保險集團成員公司及其關聯或相關公司；金融機構、澳門非強制性中央公積金服務提供者、中介人；行業組織/聯會及其成員；政府部門或監管機構和執法機構；防犯罪組織及其會員/參與者；及與萬通保險有保密協議的服務提供者及其他人士。查閱或更改個人資料，閣下有權查閱和更改任何由萬通保險持有屬於閣下的個人資料。如有需要，閣下可與萬通保險的資料保護主任提出有關要求，並以書面方式呈交至香港灣仔駱克道33號27樓。處理上述要求時，萬通保險國際可能會收取合理費用。

We, the Employer, hereby agree to the terms of the Participating Agreement and the Management Regulations of the Funds and any amendments made thereto.

本僱主同意計劃的服務協議及基金管理規章內列明的條款及將來可能作出的修訂。

Upon receipt of this application form by YF Life Insurance International Ltd., the Employee and Employer then have the obligation to make contributions as required by the Participating Agreement.

在萬通保險國際有限公司接獲本申請書後，僱員及僱主須按服務協議要求履行供款責任。

Name of Employer

僱主名稱

Authorized Signature & Company Chop

授權人簽署及公司蓋章

Date (M/D/Y)

日期(月/日/年)

Witness (Name & Signature)

見證人(姓名及簽署)

Producer Name

營業員姓名

Date (M/D/Y)

日期(月/日/年)

Producer Code

營業員編號

mmp/0041/202308/1