

To 致: HSBC Provident Fund Trustee (Hong Kong) Limited

c/o The Hongkong and Shanghai Banking Corporation Limited 香港上海滙豐銀行有限公司
 PO Box 73770 Kowloon Central Post Office 九龍中央郵政信箱73770號
 or place to the MPF drop-in box at designated HSBC branches
 或投放於指定滙豐分行的強積金寄存辦理箱
 HSBC MPF Employer Hotline 滙豐強積金僱主熱線: 2583 8033
 HSBC MPF Member Hotline 滙豐強積金成員熱線: 3128 0128



IN14

**HSBC MANDATORY PROVIDENT FUND
 DIRECT DEBIT AUTHORISATION (EMPLOYER)**
滙豐強積金: 直接付款授權書(僱主)
Note 注意:

1. Please complete in CAPITAL and BLOCK LETTERS and tick ✓ the appropriate box(es). 請用大楷及正楷填寫，並於適當的方格內加上[✓]號。
2. The information provided will be used in accordance with the relevant MPF Ordinance and/or its Regulations and the same manner as mentioned in the "Personal Information Collection Statement for HSBC Mandatory Provident Fund" ("PICS"). The PICS can be obtained through HSBC MPF website www.hsbc.com.hk/mpf or MPF hotline 2583 8033 (Employer) or 3128 0128 (Member). By signing this form, your present choice of receiving direct marketing information will remain unchanged. If you wish to update the use of your personal data for direct marketing purpose as stated in the PICS from the HSBC MPF scheme, you may exercise your right by notifying us. 所有已提供的資料將按照有關強積金條例及／或其規例及《滙豐強積金的收集個人資料聲明》(「聲明」)處理。該聲明可透過以下滙豐強積金網站www.hsbc.com.hk/mpf或強積金熱線2583 8033(僱主)或3128 0128(成員)索取。在簽署本表格後，你現時關於接收直接促銷資訊的選擇將維持不變。如你希望更新在滙豐強積金計劃聲明中使用你的個人資料作直接促銷的用途，你可通知我們行使你的選擇權。

Company name of employer 僱主公司名稱	Employer ID 僱主編號 (if applicable 如適用)														
Name of party to be credited (The Beneficiary) 收款之一方(受益人) HSBC Provident Fund Trustee (Hong Kong) Limited	Bank no. 銀行編號	Branch no. 分行編號	Account no. to be credited 收款戶口之號碼												
HSBC MPF - SuperTrust Plus 滙豐強積金智選計劃	0	0	4	5	0	0	5	3	8	7	1	5	0	0	1

I/We hereby authorise 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 may receive from the beneficiary from time to time. 本人／吾等現授權本人／吾等之下述銀行，(根據受益人不時給予本人／吾等銀行之指示)自本人／吾等之戶口內轉賬予上述受益人。

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. 本人／吾等同意本人／吾等之銀行無須證實該等轉賬通知是否已交予本人／吾等。

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). 如因該等轉賬而令本人／吾等之戶口出現透支(或令現時之透支增加)，本人／吾等願共同及各別承擔全部責任。

I/We confirm that my/our signature(s) on this application form is/are the same as that/those for the operation of my/our Savings/Current Account to be debited for the transfer. 本人／吾等確認，本人／吾等於本授權書上之簽名，與本人／吾等之儲蓄／往來戶口所簽者完全相同。

I/We agree to notify the above-named beneficiary of any change of bank account or cancellation of payment method and further agree that should there be insufficient funds in my/our bank account to meet any transfer hereby authorised, the Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may make the usual service charge to be paid by me/us. 本人／吾等同意給予受益人任何更改銀行戶口或取消付款方法之通知，並且同意如本人／吾等之戶口並無足夠款項支付吾等授權轉賬，則本人／吾等之銀行有權不予轉賬，而且銀行可向本人／吾等收取慣常之費用。

This authorisation shall have effect until further notice. 本授權書將繼續生效直至另行通知為止。

I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to my/our Bank shall be given at least 2 working days prior to the date on which such cancellation/variation is to take effect and at the same time such notice shall be given to the beneficiary. 本人／吾等同意，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 authorise HSBC Provident Fund Trustee (Hong Kong) Limited, to initiate and arrange for contributions to be debited from my bank account as particularised below, in favour of HSBC Provident Fund Trustee (Hong Kong) Limited. 本人／吾等茲以此書面授權 HSBC Provident Fund Trustee (Hong Kong) Limited 從本人下述銀行之戶口內，以自動轉賬形式支付。

Declaration and authorisation 聲明及授權書

Bank Name and Branch 銀行及分行之名稱		
Bank no. 銀行編號	Branch no. 分行編號	Account no. to be debited (Please specify account suffix number for integrated account.) 扣款戶口之號碼(如戶口屬於綜合理財戶口，請註明戶口字尾號碼。)
Address as recorded on Statement/Passbook 結單/存摺上所紀錄的地址		
I/We have read and understood the full details of this form (including the Notes on this form) and agree to abide by the rules stated herein. 本人/吾等已細閱及明白此表格內的所有內容(包括此表格上的注意部分)，並同意遵守此述的規則。		
Details as recorded on Statement/Passbook 於結單/存摺上的資料紀錄 (If you are in doubt, please contact your respective Bank. 如有疑問，請聯絡你的相關銀行。)		
A/C name as recorded on Statement/Passbook* 在結單/存摺上所紀錄之賬戶名稱*	Signature 簽署 (must be the same as the signature for the bank account 必須與銀行賬戶所簽者完全相同)	
Identification number 身分證明文件號碼 <input type="checkbox"/> HKID Card No. 香港身分證號碼 _____ () <input type="checkbox"/> Passport No. 護照號碼 _____ <input type="checkbox"/> Business Registration 商業登記 _____ <input type="checkbox"/> Certificate of Incorporation 公司註冊證書 _____ <input type="checkbox"/> Others 其他 (Please specify 請註明) _____	X S.V.	
	Date 日期	
Please provide joint account holder's details (if applicable) 請填寫聯名戶口持有人資料(如適用)		
Name of joint account holder 聯名戶口持有人姓名	Signature of joint account holder 聯名戶口持有人簽署	
Identification number 身分證明文件號碼 <input type="checkbox"/> HKID Card No. 香港身分證號碼 _____ () <input type="checkbox"/> Passport No. 護照號碼 _____ <input type="checkbox"/> Business Registration 商業登記 _____ <input type="checkbox"/> Certificate of Incorporation 公司註冊證書 _____ <input type="checkbox"/> Others 其他 (Please specify 請註明) _____	X S.V.	
	Date 日期	

* If not same as the name registered for the MPF scheme, please provide the relevant documents. 如與強積金計劃所登記的姓名不同，請提供相關文件。