

To 致： **The Hongkong and Shanghai Banking Corporation Limited**
("Bank", which includes its successors and assigns)
香港上海滙豐銀行有限公司 (「銀行」，包括其繼承人及受讓人)

Date 日期	day 日 / month 月 / year 年
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LETTER OF CONSENT (FOR INVESTMENT / MARGIN FX TRADING / INVESTMENT FINANCING ACCOUNT)
同意書 (投資 / 外匯孖展買賣 / 投資融資戶口適用)

- Note 注意：**
- Please tick where applicable. 請在適當的地方加上剔號。
 - #For new account, the account number to be filled by Bank after account opened. #新開戶口號碼，銀行將於戶口開立後填寫。
 - Your request will normally be processed within 5 business days upon receipt of your form. A business day is a day other than Saturday, Sunday and public holiday, on which banks are open for general business in Hong Kong.
在一般情況下，銀行將在收到閣下的申請表後五個營業日內處理閣下的申請。營業日指銀行在香港開放營業的日子 (星期六、日及公眾假期除外)。
 - The Bank will execute the request accordingly, and no acknowledgement will be sent to you. 銀行將應閣下要求執行指示，不會作另行通知。


Employee Name 僱員姓名	Identification Document Number 身分證明文件號碼	#Investment/Securities/Margin FX Trading/Investment Financing Account Number #投資 / 證券 / 外匯孖展買賣 / 投資融資戶口號碼
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Section A (To be Completed by the Employer) 甲部 (由僱主填寫)

Employer Name 僱主名稱	
Part 1 第一部分 1. We hereby give our consent to our above named employee, a registered person under the Securities and Futures Ordinance, to open/maintain an Investment/Securities/Margin FX Trading/Investment Financing Account with the Bank. 本人等於此同意本公司的上述僱員，證券及期貨條例下的註冊人，於銀行開設 / 維持一投資 / 證券 / 外匯孖展買賣 / 投資融資戶口。 2. With this consent, the Bank can/continue to provide the account services to the above named employee. 此同意書同意銀行提供 / 繼續提供戶口服務予上述僱員。	
Part 2 (This section does not apply for Margin FX Trading Account) 第二部分 (此部分不適用於外匯孖展買賣戶口) <input type="checkbox"/> We hereby request the Bank to deliver copies of all dealing transactions relating to the Investment/Securities/Investment Financing Account opened by the above named employee to the following address. 本人等要求銀行傳送上述僱員持有投資 / 證券 / 投資融資戶口的所有往來交易副本致下述地址：	
Copy Type of Dealing Transactions 往來交易副本種類 <input type="checkbox"/> Contract Notes 成交單據 <input type="checkbox"/> Monthly Statements 每月結單	Address 地址 Note 注意： Address in USA / Canada / South Korea will not be accepted. 美國 / 加拿大 / 南韓地址，將不獲安排。

Signature of Employer (Sign together with Company Chop) 僱主簽署 (簽署及蓋公司印章)			
X			
Name 姓名	1	2	3
Title 職銜			
Contact Telephone No. 聯絡電話號碼			

Section B (Must be Completed by the Employee if Section A - Part 2 is Opted) 乙部 (如選擇甲部 - 第二部分，此欄必須由僱員填寫)

I hereby confirm and agree that, according to paragraph 12.2 of the Code of Conduct for Persons Licensed by or Registered with the Securities and Futures Commission, the Bank be authorised to accede to my employer's request of delivering copies of contract notes for all dealing transactions and monthly statements under my Investment/Securities/Investment Financing Account. 本人於此確認及同意，依照證券及期貨事務監察委員會持牌人或註冊人操守準則第 12.2 節，銀行獲授權按本人僱主要求傳送本人持有投資 / 證券 / 投資融資戶口的所有往來交易的成交單據及每月結單的副本致本人僱主以上所指示的地址。	
Confirmed and agreed 確認並同意 (For Joint Investment/Securities Account only 只適用於聯名投資 / 證券戶口)	
X Signature of Employee 僱員簽署 Contact Telephone Number 聯絡電話號碼：	 X Signature of Joint Account Holder 聯名戶口持有人簽署

For Bank Use Only 銀行專用		
Branch Contact Person Details Name: Tel No.:	Remarks	Branch Chop or Authorised Signature
Note: Submit this form to the Local Compliance Officer APH CMP L33 HSBC Main Bldg for further processing.		