

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



INY1

**HSBC MANDATORY PROVIDENT FUND
AUTHORISED SIGNATURES SPECIMEN (EMPLOYER)
滙豐強積金: 授權人簽名式樣(僱主)**

Note 注意:

- Please complete in CAPITAL and BLOCK LETTERS. 請用大楷及正楷填寫。
- Certified true copies should be certified by any of the following personnel 提交認證副本可經由下列人士核證:
 - A certified public accountant/lawyer/banker/notary public acceptable to entities of HSBC Group; or 任何滙豐集團成員認可的執業會計師/律師/往來銀行/公證人; 或
 - A member of Hong Kong Institute of Chartered Secretaries (HKICS); or 任何香港特許秘書公會會員; 或
 - A MPF specialist at HSBC designated branches — You may bring along your HK permanent ID card/passport to any one of HSBC designated branches for verification purpose. For the information about the HSBC designated branches, please visit www.hsbc.com.hk/mpf. 指定滙豐分行強積金職員 – 您可攜同您的香港永久性居民身分證/護照親臨任何一間指定滙豐分行, 以便我們核實您的身分。查詢指定滙豐分行詳情, 請瀏覽www.hsbc.com.hk/mpf。
- The personal data provided will be treated in the same manner as set out in the “Personal Information Collection Statement for HSBC Mandatory Provident Fund” (“Statement”). A copy of the Statement can be obtained through HSBC MPF website www.hsbc.com.hk/mpf or MPF hotline 2583 8033 (Employer) or 3128 0128 (Member). 所有個人資料均按照《滙豐強積金的收集個人資料聲明》(「聲明」)處理。該聲明可透過滙豐強積金網站www.hsbc.com.hk/mpf或強積金熱線2583 8033 (僱主)或3128 0128 (成員)索取。

A. DETAILS OF SCHEME 計劃資料

1. Employer ID 僱主編號	2. Pay centre ID 付款中心編號	3. Effective date 生效日期 _____ _____ _____ _____ _____ _____ Year 年 Month 月 Day 日
4. Company name of participating employer 參與僱主公司名稱		

B. AUTHORISED INSTRUCTION 授權指示

Newly added authorised personnel 新增之授權人士		
Full Name 全名 (same as that shown on your HKID card/Passport 與香港身分證/護照上的姓名相同)		
Other name (in English) (if any) 別名 (英文)(如有)		
Date of birth 出生日期	_____ _____ _____ _____ _____ _____ Year 年 Month 月 Day 日	_____ _____ _____ _____ _____ _____ Year 年 Month 月 Day 日
Nationality 國籍		
HKID card/Passport no. 香港身分證/護照號碼 (please provide a certified true copy 請附上認證副本)		
Passport number should be given only if you do not possess HKID card. For individuals who are NOT the holders of HK permanent ID card, please provide a certified true copy of the HKID card and the Passport. 只在沒有香港身分證情況下才填寫護照號碼。如個別人士並非持有香港永久性居民身分證, 請同時提供香港身分證及護照之認證副本。		
Position 職銜		
Residential address (in English) 住宅地址 (英文)	_____ _____ City 城市 _____ Country 國家 _____	_____ _____ City 城市 _____ Country 國家 _____
Permanent address (in English) 永久地址 (英文) (if different from residential address 如與住宅地址不同)	_____ _____ City 城市 _____ Country 國家 _____	_____ _____ City 城市 _____ Country 國家 _____
Specimen signature 簽署式樣	X	X
Cancellation of authorised personnel 終止之授權人士		
Full Name 全名 (same as that shown on your HKID card/Passport 與香港身分證/護照上的姓名相同)		
Position 職銜		

C. DECLARATION AND AUTHORISATION 聲明及授權書

This form should be signed by an authorised person with his/her signatory previously submitted to The Hongkong and Shanghai Banking Corporation Limited. Otherwise, please send us supporting documents and specify reason in below. 本表格須由已於早前向香港上海滙豐銀行有限公司提交其簽名式樣之授權人士簽署。否則，請遞交證明文件及於下列註明原因。

Reason 原因 _____

(a) I/We confirm that the identities of the above newly added authorised personnel had been verified and the information given in the form is correct and complete. 本人／吾等確認上述新增之授權人士的身分已被核實和本表格所提供的資料為正確及完整。

(b) I/We have read and understood and agree with the "Personal Information Collection Statement for HSBC Mandatory Provident Fund"^{Note 3}. 本人／吾等已細閱及明白並同意《滙豐強積金的收集個人資料聲明》^{注意3}。

X _____
Authorised signature of employer 僱主授權簽署

Full name 全名

Position 職銜

Date 日期

X _____
Authorised signature of employer 僱主授權簽署

Full name 全名

Position 職銜

Date 日期