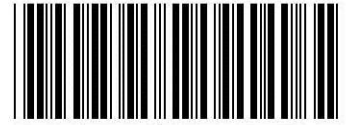


To 致： **The Hongkong and Shanghai Banking Corporation Limited**
香港上海滙豐銀行有限公司



SECURED CREDIT AMENDMENT/CANCELLATION FORM
(Integrated Account) 有抵押信貸修改/ 取消表格 (綜合理財戶口)

Note 注意： 1. Please complete in Block Letters and tick where applicable.
請用英文正楷填寫，並在適當的地方加上剔號。

2. Please return your completed form either (1) by mail to "The Hongkong and Shanghai Banking Corporation Limited, P O Box 72677, Kowloon Central Post Office, Kowloon, Hong Kong", or (2) by visiting your nearest HSBC Branch. 請將已填妥的表格 (1) 寄回九龍中央郵政局郵政信箱 72677 號「香港上海滙豐銀行有限公司」收，或 (2) 交回就近滙豐分行。

Date 日期	day 日 / month 月 / year 年

Account Information 戶口資料	
Account Name 戶口名稱	Account Number 戶口號碼
Application Type 申請類別	
<input type="checkbox"/> Change of Secured Credit Facility 更改有抵押信貸服務	
<input type="checkbox"/> Revision of Credit Ceiling Limit 更改信貸最高限額	
New Credit Ceiling Limit 新信貸最高限額	HKD 港幣
<input type="checkbox"/> Change Investment Account Option 更改投資服務戶口選項	
<input type="checkbox"/> Add the secured credit facility to the Investment Services Account(s) of the above account. 將有抵押信貸服務加入上述戶口的投資服務戶口內。	
Note 注意： 1. The associated cash account / settlement account for Investment Services should be the same as the Integrated Account with secured credit. 投資服務戶口內的相關現金戶口/ 結算戶口必須與綜合理財戶口內設置的有抵押信貸服務戶口相同。	
2. A security over the assets within the Investment Services Account(s) will be created in accordance with the Integrated Account Terms and Conditions to secure the secured credit facility. 按照綜合理財戶口條款及細則的規定，存於投資服務戶口內的資產將抵押本行，以作為有抵押信貸服務的擔保。	
<input type="checkbox"/> Remove the secured credit facility from the Investment Services Account(s) of the above account. 將有抵押信貸服務從上述戶口的投資服務戶口內移除。	
Note 注意： The effective limit of the secured credit facility may be reduced after removal from the Investment Services Account(s). Please check if the new effective limit is sufficient to cover the utilisation. 從投資服務戶口移除之後可能會使有抵押信貸的可用限額減少，請確認新限額足夠支持已使用金額。	
<input type="checkbox"/> Change Facility Account Setup 更改服務戶口設置	
<input type="checkbox"/> from Integrated Current Account to Integrated Savings Account 由綜合往來戶口改設於綜合儲蓄戶口	<input type="checkbox"/> from Integrated Savings Account to Integrated Current Account 由綜合儲蓄戶口改設於綜合往來戶口
Note 注意： If the secured credit facility has been added into your Investment Services Account(s), the associated cash account / settlement account for Investment Services should also be changed to the above account. 如有抵押信貸服務已加設於投資服務戶口內，投資服務戶口內的相關現金戶口/ 結算戶口必需同時更改為上述戶口。	
<input type="checkbox"/> Annual Review 年度檢討	
<input type="checkbox"/> Cancellation of Secured Credit Facility Granted on the above account 取消批予上述戶口的有抵押信貸服務	
Note 注意： All facilities supported by the Secured Credit, if any, will also be cancelled. 以是項信貸作抵押的所有安排，如有，將一併取消。	

Relationship Declaration 關係申報

Are you and/or the joint applicant a ♦relative of any of the directors / ♦employees / ♦controllers / ♦minority shareholder controllers of The Hongkong and Shanghai Banking Corporation Limited (HSBC), its branches, subsidiaries or affiliates in Hong Kong or overseas (e.g., Hang Seng Bank), or other entities over which HSBC is able to exert control? 申請人及/ 或聯名申請人是否為香港上海滙豐銀行有限公司(滙豐)、其分行、其附屬公司或其聯屬公司不論在香港境內或境外(例如恒生銀行)、或滙豐能對其行使控制的其他實體的董事/ ♦僱員/ ♦控權人/ ♦小股東控權人的♦親屬?

No, and I/we agree to notify the Bank promptly in writing if this information is no longer true and correct
否, 倘這些資料不再真實正確, 本人/ 我們同意儘速以書面通知貴行

Yes, please state his/her full name: 是, 請填上親屬的名字:

Principal/Sole Account Holder
第一/ 獨立戶口持有人

Full Name in English 英文全名

Relationship 關係

Joint Account Holder
聯名戶口持有人

Full Name in English 英文全名

Relationship 關係

Are you and/or the joint applicant a director / employee / controller / minority shareholder controller of HSBC, its branches, subsidiaries or affiliates in Hong Kong or overseas, or other entities over which HSBC is able to exert control? 申請人及/ 或聯名申請人是否為香港上海滙豐銀行有限公司(滙豐)、其分行、其附屬公司或其聯屬公司不論在香港境內或境外, 或滙豐能對其行使控制的其他實體的董事/ 僱員/ 控權人/ 小股東控權人?

No, and I/we agree to notify the Bank promptly in writing if this information is no longer true and correct
否, 倘這些資料不再真實正確, 本人/ 我們同意儘速以書面通知貴行

Yes, please state your staff number: 是, 請填上職員號碼:

Principal/Sole Account Holder
第一/ 獨立戶口持有人

Staff Number 職員號碼

Joint Account Holder
聯名戶口持有人

Staff Number 職員號碼

If you and/or the joint applicant answer "yes" to any of the above questions, please state the total amount of unsecured exposures of HSBC, its branches and its subsidiaries: 如申請人及/ 或聯名申請人就以上的問題的回答為「是」, 請提供滙豐、其分行及其附屬公司對以下人士/ 機構的無保證風險承擔總額:

- to you/joint applicant personally; 申請人或聯名申請人;
- to any firm, partnership or non-listed company controlled by you/joint applicant or of which you/joint applicant are interested as director, partner, manager or agent; and 對任何申請人或聯名申請人所控制或申請人或聯名申請人以董事、合夥人、經理或代理人的身分而具有權益的商號、合夥或非上市公司; 及
- to any individual, firm, partnership or non-listed company of which you/joint applicant are acting as a guarantor 對任何申請人或聯名申請人作為擔保人的個別人士、商號、合夥或非上市公司

HKD 港幣

I/We confirm that I/we have obtained consent from the individuals listed above for the provision of their information to HSBC, its branches and its subsidiaries for the purpose of enabling HSBC to comply with the Banking Ordinance, Banking (Exposure Limits) Rules and/or any other similar laws and regulations and/or any related commitments to regulators in any jurisdiction from time to time. 本人/ 我們確認本人/ 我們已獲得以上提及的人士的同意提供其資料給滙豐、其分行及其附屬公司以便滙豐能夠遵守《銀行業條例》、《銀行業(風險承擔限度)規則》及/ 或不時在任何司法管轄區的其他類似法律及規定及/ 或對監管機構作出的相關承諾。

I/We hereby authorise HSBC's branches and subsidiaries to disclose to HSBC information relating their unsecured exposures to the above persons for the purpose of verifying the information provided by me/us. 本人/ 我們授權滙豐的分行及附屬公司披露其對本人/ 我們的無保證風險承擔的資料以便滙豐核實本人/ 我們提供的資料。

Note 注意: ♦ You may request from the Bank the definitions of these terms and a list of the abovementioned entities.

♦ 閣下可向本行查詢有關定義及以上所提及機構的名單。

Declaration 聲明

Applicable to Secured Credit Amendment Only 只適用於有抵押信貸修改:

1. I/We understand that the acceptance of this amendment and the credit limit granted shall be at the sole discretion of the Bank.
本人(等)明白貴行有全權決定是否接受是項修改及批予信貸額。
2. I/We understand that, if my/our amendment is approved, the Facility will be granted subject to the relevant provisions in the Integrated Account Terms and Conditions. I/We agree and confirm that the security over my/our personal assets created under such terms and conditions will secure the Facility in accordance with such terms and conditions. 本人(等)明白, 如本人(等)的修改獲得批准, 該項信貸服務將受綜合理財戶口條款及細則的有關規定所約束。本人(等)同意及確認, 該等條款中設立的個人資產抵押, 將根據該等條款作為該項信貸服務的擔保。
3. I/We hereby consent to the Bank providing, to any person providing security for this facility (a Surety), a copy of the proposed facility agreement including full details of the security to be provided, a copy of any formal demand sent to me/us and, at the request of the Surety, a copy of the latest statement of account provided to me/us. 本人(等)同意貴行給予為本項信貸提供抵押品的任何人士(擔保人)有關本項信貸建議合約的副本(包括抵押品的詳細資料)、發給本人(等)任何有關要求還款正式通知書的副本、或在擔保人提出要求時, 提供發給本人(等)最新結單的副本。
4. I/We have read and agree to the Integrated Account Terms and Conditions and Key Facts Statement for Overdraft Facility.
本人(等)已細閱及同意綜合理財條款及細則及透支服務產品資料概要。
5. I/We understand that the Bank does not appoint any third parties to refer credit facility applications to it and hereby confirm that this application was not referred by a third party under beneficial arrangement. 本人(等)明白貴行並沒有委託任何第三方轉介信貸服務申請且確是次申請並非由第三方在有益安排下轉介。

X
Signature 簽署
(Name 姓名:)

S.V.

X
Signature 簽署
(Name 姓名:)

S.V.

For Bank Use Only 銀行專用

ID Checked Permanent Hong Kong Residents <input type="checkbox"/> Yes <input type="checkbox"/> *No	Remarks Amendment: <input type="checkbox"/> Non-Jade Premier account Checked Cancellation Check: <input type="checkbox"/> Settle the outstanding balance, if any The account with Wealth Portfolio Lending (WPL): <input type="checkbox"/> Yes <input type="checkbox"/> No	
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Amendment of Credit Ceiling Limit

ICSM Score <input type="checkbox"/> A - E, Z or Blank <input type="checkbox"/> *F or G	Age of Customer <input type="checkbox"/> 18 - 70 <input type="checkbox"/> > *70	Relationship with Director/ Employee of the Bank <input type="checkbox"/> Yes <input type="checkbox"/> No	CDS Checked Class O related to FCC / Compliance / KYC / CSEM / SCC, Class B or Class D <input type="checkbox"/> *Yes (Code:) <input type="checkbox"/> No
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For Deviation Case (<i>*Please refer to eManual/CGPM for latest handling procedures.</i>) <input type="checkbox"/> Ceiling Limit <input style="border: 1px solid black; padding: 0 10px;" type="text" value="HKD"/> <input type="checkbox"/> Debit Interest Rate Code <input style="border: 1px solid black; width: 150px; height: 20px;" type="text"/> <input type="checkbox"/> Suppress Facility Letter = Y <input type="checkbox"/> Review Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> (day/month/year)								Application Approved by Authorised Signature (with Signature Number, Full Name and Staff ID)	Branch Chop <p style="text-align: center;"><i>Note: Submit this form via faxswitch 9135</i></p>