



Important Notes 重要事項:

- The changes filled in this form will supersede any previous information/form(s) which has/have been submitted to the Administrator. Information will remain unchanged if no update in this form. 本表格所列之更改將取代所有之前已遞交行政管理人的資料/表格。 如 本表格沒有更新,現有資料維持不變。
- You must notify RBC Investor Services Trust Hong Kong Limited (the "Trustee") within 30 days if there is any change in circumstances that makes any of the information provided in the self-certification incorrect or incomplete and provide a suitably updated self-certification form. 你必須在改變後的 30 天內通知加皇信託香港有限公司 (「受託人」) 有關的改變並提供適當地更新的自我證明。
- All sections below should be completed in English and in PLOCK letters. 所有部分语刊

SHKP MPF EMPLOYER SPONSORED SCHEME **Member Information Change Form**

新地強積金僱主營辦計劃 成員資料更改表格



文正楷填寫。	ompleted in English and in block letters. 所有部方須以来	
SECTION I 第一部分	PERSONAL DETAILS 個人資料	
Member Name 成員姓名		
(Surnai	me 姓) (Given Name 名) port 須與香港身份證 / 護照上的相同)	
Member No. 成員編號	Telephone No. 電話號碼 ————————————————————————————————————	
身份證明文件 #註1	KID No. 香港身份證號碼 (Passport No. is applicable <u>ONLY</u> for member without HKID Card 護照號碼 <u>僅供</u> 沒有香港身份證的成員填寫)	
Notes 備註: 1. The information updated by Passport Number provided 金帳戶(如有)。	elow will be applied to all your MPF accounts under SHKP MPF Employer Sponsored Scheme according to the HKID / I, if any. 以下更改的資料,將根據閣下所提供的香港身份證/護照號碼更新至閣下於新地強積金僱主營辦計劃內所有強積	
SECTION II 第二部分	UPDATE PERSONAL RECORD (Only Complete Relevant Part(s)) 更新個人記錄 (只需填上適用部分)	
☐ (i) Change of Contact 更改 (a) New Residential Add	ate box(es). 請在適當方格加上剔號 (✔)。 文聯絡資料 ress (P.O. Box will NOT be accepted) 新住址(郵政信箱恕不受理) lish <u>OR</u> Chinese address below 只需提供英文或中文地址: Flat / Room Floor Block	
Building / Estate		
Number and Name of Street		
District Area / City		
	☐ Hong Kong ☐ Kowloon ☐ New Territories ☐ Outlying Islands ☐ China (Shenzhen) ☐ China (others))
	□ Country	

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大廈 / 屋邨 門牌號碼 及街道名稱	_																													
地區/城市																														
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		國	家																											
(b) New Correspondence ☐ Update my corres you are not requii 以本人於計劃內最	spon red to	den o pr	ce a	addr de a	ess a	acco ss in	ı this	s part	.)												der	the	Sc	hen	ne (lf yc	u ticl	< this	iter	n,
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地區 / 城市																														
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(c) New Telephone Nos. 新電話號碼		Mob 手提	bile 是電記	括																		1								
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(d) New Email Address 新電郵地址			L		Coun	uy C	oue	地區	近11向]		
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(e) Nationality 國籍				_														-		-										
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П	新語言 (iii) MPF A			nca S	MS 9	Sarvic	中文	仝框 1	后结 经	5.红油		- •	文																
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	Member will receive a SMS each quarter including the information of 1) account balance and 2) gain/(loss) amount since account setup to the quarter end. Service details are as follows: 每季度以短訊通知成員自帳戶成立日截至季末的 1) 帳戶結餘及 2) 盈 / (虧) 總額。 服務詳情如下: 1. This service covers all existing accounts of members under the Scheme. 本服務包括成員在本計劃下的所有現存帳戶。																												
		 3. 	update	ed. 短 angua	訊以 age v	表格第	三部分	提供	Kong n 或及後 uage s	更新的)香	港手	-提電	舌號码	馬桑	。出象											-		
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			request Account E																		mem	ber i	s cu	rren	tly u	sing	this	MF	'F
	(iv) E-Not 以電子		ion for de 收取法例							by the	e Le	gis	lation	("R	eg	ulatoı	y D	ocı	ume	nts")								
	This service will provide e-notification for all Regulatory Documents including but not limited to the Member Notice, Annual Member Benefit Statement, Fund Fact Sheets, MPF Scheme Brochure and addendum of the MPF Scheme Brochure. To register this service, you must provide email address or HK mobile number. After registration, you will receive email / SMS reminder (SMS would only be sent if no email address is provided), informing you the readiness of the Regulatory Documents at the Online Pension Services Center. 所有監管文件(包括但不限於成員通知書、成員權益報表、基金便覽、強積金計劃說明書及其補充資料)將透過電子通訊發出通知。 閣下必須提供電郵地址或香港流動電話號碼方可登記此項服務。登記後,我們將透過電郵/短訊 (如未有提供電郵地址,方會發出																												
	短訊) 通知閣下登入網上退休金服務中心,查閱相關監管文件。 If you would like to update your email address, HK mobile number or cancel this service, please submit your change request 14 days in advance through our Online Pension Services Centre or complete the Information Change Form. 如閣下欲更改電郵地址、香港流動電話號碼或取消此項服務,請在更改 14 天前透過我們的網上退休金服務中心或填寫資料更改表格,提交更改指示予本公司。																												
		□ I understand the service details and the terms above, email/ SMS reminder will be sent to the email address/ HK mobile number of my MPF account record under the Scheme (SMS would only be sent if no email address is provided). I <u>agree</u> to enroll this service. 本人明白以上服務詳情及條款並 <u>同意</u> 参加此項服務,電郵或短訊將發送至本人在本計劃的強積金帳戶的電郵地址/香港流動電話號碼(如未有提供電郵地址,方會發出短訊)。																											
			l <u>request</u> -Notificati																					rentl	y us	ing t	:his	E	
	(v) Chang	e of	Name or	Sign	ature	Spec	cimen⁵	lote2	更改姓名	3或簽	署式	樣	荊註2																
	Surname (姓 (英文)	Engli	sh)																										
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	姓 (中文) (Must be s	ame	as HKID /	/ Pas	sport	須朗	香港身	公 語	/ 護昭 [- 的相1	司)		_ 名			-													-
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	For your change of name to be registered in our records, you must: 若閣下需要更改登記於計劃內的姓名,閣下需要: - Attach a certified copy# of the Deed Poll and your new Hong Kong Identity Card; or 附上改名契及新身份證之核證副本#;或																												
	- Attach a co																												

certified by Notary Public, Lawyer, Certified Public Accountant or Banker 由公證人、律師、會計師或銀行家核證

	(vi)	Request of Account Document 帳戶文件要求										
		The latest Member Benefit Statement 最近期的成員權益報告										
		Contribution Statement From 由 (MM/YY) (月月/年年)	To (MM/YY) 至 (月月/年年)									
		MPF Account Balance Summary 強積金帳戶結餘摘要										
		Others 其他 (please specify 請列明										
	(vii)) Other Changes 其他更改 (Please specify 請列明)										
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		> 	ECTION STATEMENT 收集個人資料聲明									
the Merrasson any of 是現士 #The bein Trus Adn Kor Coll 有限	The information which the Member may from time to time provide to RBC Investor Services Trust Hong Kong Limited, the Trustee, is to enable the Trustee to carry on retirement scheme business and may be used for the purposes of communication with the Member / the Employer / the Member's personal representative(s), and transferring to any related trustee or any other trustee carrying on retirement scheme business or any association or government authority that exists or is formed from time to time or any individuals / organisations associated with the Trustee or any selected party as the Trustee may consider necessary or appropriate whether local or overseas subject to applicable laws for the purpose of, or in connection with, retirement scheme business or any directly related purpose*. 成員不時向受託人 — 加皇信託香港有限公司提供的資料是使受託人得以運作退休金業務,以及可與成員/僱主/成員的遺產代理人通訊,及轉交到任何有關受託人或運作退休金業務的任何其他受託人或其有或不時成立的任何協會或政府機關或任何與受託人有關的個人/組織,或受託人在遵從適用法律的前提下,認為有需要或合適而選定的任何人士(不論本地或外地),目的在於或關於退休金業務或任何直接有關的用途*。 **The information the Member provides to the Trustee is on a voluntary basis. However, failure to supply information may result in the Trustee being unable to process this application or carry on retirement scheme business in relation to your membership. *成員向受託人提供資料均屬自願,但成員若未能提供資料,或會導致受託人無法處理此項申請或運作有關 閣下的退休金業務。 The Member has the right to obtain access to and to request correction of any personal information concerning himself / herself held by the Trustee. Request for such access can be made in writing and addressed to the Trustee's delegated administrator: the Manager, Pensions Administration Department, BestServe Financial Limited, 10/F, One Harbourfront, 18 Tak Fung Street, Hunghom, Kowloon, Hong Kong. The Member may also contact the SHKP MPF Hotline at 3183-3183 in case of any queries regarding this Personal Information Collection Statement. 成員有權翻查及要求更正任何由受託人持有有關他/她的個人資料。有關要求可以專品的人類的關助。											
SE	СТ	ION IV 第四部分 DECLARATION 聲明										
		confirm that the above details and/or the attached information (if any) 比確定以上細則及/或附上之資料(如有)皆為真實正確。	are true and correct.									
		Signature of Member ^{Note3} 成員簽署 ^{備注3} 日期 Date	日/月/年 D D/MM/YYYY									
3.	Notes 備註: 3. If you are unable to provide the signature that matched with the Administrator's record for verification, you are advised to go to the Administrator's office (address as below) in person to change your signature specimen. Alternatively, you may also make a statutory declaration at a Public Enquiry Service Centre of the Home Affairs Department or a Notary Public to confirm your new signature specimen. The content of the declaration should include a statement "I declare that my new signature specimen is as below …". For assistance, please contact SHKP MPF Hotline 3183 3183. After completion, please return the statutory declaration together with the duly completed Member Information Change Form to the Administrator. 如 閣下未能提供與行政管理人記錄相符的簽署以作核對,請親身到行政管理人辦公室(地址如下)更改簽署式樣。 閣下亦可到民政事務總署諮詢服務中心向監誓員或公證人作法定聲明,確實新的簽署式樣。法定聲明內容應包括『本人聲明新簽署式樣如下…』等字句。如需協助,請聯絡新地強積金熱線 3183 3183。完成後,請將此法定聲明連同填妥的成員資料更改表格一同交回予行政管理人。											
Plea	se	send the completed form to:	請將填妥表格交予:									
Fina	ıncia	MPF Employer Sponsored Scheme, The Administrator, BestServe	新地強積金僱主營辦計劃行政管理人-卓譽金融服務有限公司 香港九龍紅磡德豐街 18 號海濱廣場一座 10 樓									
		ne Harbourfront, 18 Tak Fung Street, Hunghom, Kowloon, Hong Kong 33 3183 Fax: 3183 1718	電話: 3183 3183 傳真: 3183 1718									
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