

Please mark "✓" in the appropriate box. 請於適用的方格內填上"✓"號。

Part I. Employer details 僱主資料		Participating Plan No. 參與計劃編號
Name of Plan 計劃名稱		
Name of Company 公司名稱	English	
	中文	

Please either complete Part II or Part III. 請選擇填寫第 II 或第 III 部份。

Part II. Updated Authorised Signature Specimen 更新授權人簽署式樣 (Remark 備註)	
Signing Arrangement 簽署形式	
<input type="checkbox"/> Any one authorised signatory signing singly 任何一位獲授權簽署人簽署	<input type="checkbox"/> Any two authorised signatories signing jointly 任何兩位獲授權簽署人簽署
Effective Date 生效日期 : _____ / _____ / _____ (D日 / M月 / Y年)	
(1) Name 姓名 : _____	
Title 職銜 : _____	Specimen Signature : _____
<input type="checkbox"/> HKID Card No. 香港身份證號碼 : _____	
<input type="checkbox"/> Passport No. 護照號碼 : _____	
(2) Name 姓名 : _____	
Title 職銜 : _____	Specimen Signature : _____
<input type="checkbox"/> HKID Card No. 香港身份證號碼 : _____	
<input type="checkbox"/> Passport No. 護照號碼 : _____	
(3) Name 姓名 : _____	
Title 職銜 : _____	Specimen Signature : _____
<input type="checkbox"/> HKID Card No. 香港身份證號碼 : _____	
<input type="checkbox"/> Passport No. 護照號碼 : _____	
(4) Name 姓名 : _____	
Title 職銜 : _____	Specimen Signature : _____
<input type="checkbox"/> HKID Card No. 香港身份證號碼 : _____	
<input type="checkbox"/> Passport No. 護照號碼 : _____	
Remark 備註 This update authorised signature specimen will supersede all previous version. 此更新授權人簽署式樣將取替原有之授權簽名式樣。	

Part III. Addition / Removal of Authorised Signatory(ies) 增加 / 刪除授權人	
Effective Date 生效日期 : _____ / _____ / _____ (D日 / M月 / Y年)	
The following person(s) is / are added to the latest authorised signatory list. 下列人士被獲准包括在最近期之授權簽名表內。	
A. Addition 增加	
(1) Name 姓名 : _____	
Title 職銜 : _____	Specimen Signature : _____
<input type="checkbox"/> HKID Card No. 香港身份證號碼 : _____	
<input type="checkbox"/> Passport No. 護照號碼 : _____	
(2) Name 姓名 : _____	
Title 職銜 : _____	Specimen Signature : _____
<input type="checkbox"/> HKID Card No. 香港身份證號碼 : _____	
<input type="checkbox"/> Passport No. 護照號碼 : _____	

Part III. Addition / Removal of Authorised Signatory(ies) 增加 / 刪除授權人 (Continued 續)

The following person(s) is / are removed from the latest authorised signatory list. 下列人士被刪除於最近期之授權簽名表內。

B. Removal 刪除

(1) Name 姓名 :	_____	(2) Name 姓名 :	_____
Title 職銜 :	_____	Title 職銜 :	_____
(3) Name 姓名 :	_____	(4) Name 姓名 :	_____
Title 職銜 :	_____	Title 職銜 :	_____

Part IV. Personal Information Collection Statement 收集個人資料聲明

The personal data provided by or in respect of Members and Participating Employers of the BCT Premier Pooled ORSO Retirement Plan ("the Plan") and / or their dealing / transaction details will only be accessed and handled by properly authorised staff of Bank Consortium Trust Company Limited ("BCT") and its properly authorised service providers and may be used, disclosed and / or transferred (whether in or outside Hong Kong) to such persons as BCT or any of its service providers may consider necessary, including governmental authorities and regulators, and any of BCT's direct and indirect shareholders, subsidiaries and affiliated companies (and the subsidiaries and affiliated companies of the said shareholders including BCT Financial Limited) (collectively referred to as "BCT Related Companies") for any purpose of and / or in connection with (i) any service as may be provided to them such as provident fund services and financial advice / planning services including, but not limited to the processing, administering, managing, and analysing of their, as the case may be, contributions, accrued benefits and portfolios; (ii) furthering and / or improving the provision of services by BCT or BCT Related Companies to customers generally (including the facilitation of the provision of services to enable the customers of BCT or BCT Related Companies generally to access (provident fund or other) account details through the internet and / or automated teller machine networks such as JETCO); (iii) compliance with applicable laws and regulations, and / or (iv) any other purposes relating to the above. If there is any change in the information provided, BCT should be notified as soon as practicable. Failure to provide the information requested may result in BCT being unable to process the instructions.

Members and Participating Employers have a right to request access to and correction of any personal data or to request that personal data about them not be used for direct marketing purposes. Requests can be made in writing to the Data Protection Officer at BCT, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong.

由銀聯信託超卓匯集退休計劃(「本計劃」)成員及參與僱主所提供或相關之個人資料及 / 或他們的買賣 / 交易細節僅供銀聯信託有限公司(「銀聯信託」)及其正式授權之服務供應商正式授權之職員使用及處理, 及在銀聯信託或其任何服務供應商認為有需要時, 或會被使用、披露及 / 或轉移(在香港境內或境外)予個別人士, 包括政府機關、監管機構及任何銀聯信託直接及間接的股東、附屬公司及聯屬公司(及前述股東的附屬公司及聯屬公司包括銀聯金融有限公司)(全部被視為「銀聯信託相關公司」)為任何用途及 / 或有關於(一)任何可能向他們提供的服務, 例如退休金服務及財務建議 / 財務計劃服務包括但不限於處理、掌管、管理及分析供款、累算權益及投資組合, 視乎情況而定;(二)進一步及 / 或提升銀聯信託或銀聯信託相關公司提供予客戶之一般服務(包括協助提供服務以令銀聯信託或銀聯信託相關公司之客戶可於互聯網及 / 或自動櫃員機網絡例如銀通處理(退休金或其他)戶口資料);(三)遵守適用之法律及規例及 / 或(四)任何與上述有關之其他用途。如所提供資料有所變更, 請在可行的情況下儘快通知銀聯信託。未能提供所需資料可能導致銀聯信託不能處理有關指示。

成員及參與僱主有權要求查閱或更改任何個人資料或要求個人資料不被用作直銷之用。請以書面聯絡銀聯信託之資料保護主任, 香港皇后大道中 183 號中遠大廈 18 樓。

Part V. Declaration and Signature 聲明及簽署

- I / We confirm that I / we have obtained the consent of the above person(s) with regard to the information provided herein above to BCT.
 - I / We confirm that the updated particulars of the authorised signatory(ies) provided under Part II of this form will supersede that of the authorised signatory lists previously provided to BCT.
 - I / We further undertake to indemnify BCT and keep BCT, as trustee, indemnified against all claims, demands, actions, proceedings, losses, damages, liabilities, cost and expenses of whatever nature which may be brought against BCT arising out of or in connection with BCT's reliance on the information herein provided.
 - I / We authorise the above person(s) to sign on behalf of the Company any document(s) and / or give instructions in relation to the operation of the Participating Plan. I / We also agree that such documents signed by the above person(s) will have binding effect on the Company.
 - I / We declare that to the best of my / our knowledge and belief, the information given in this form and / or its attachment(s), if any, is correct and complete.
- 本人 / 吾等確認本人 / 吾等已獲上述人士之同意向銀聯信託提供有關上述人士的資料。
 - 本人 / 吾等並確認在此表格第 II 部份內所提供的授權簽署者之更新資料將取代以往提供予銀聯信託之授權簽名表之有關資料。
 - 本人 / 吾等並承諾, 倘若銀聯信託作為受託人, 因上述申報之資料而招致任何形式的損失、損害及支出, 或因此而涉及任何申索、要求、法律程序以及需要負上任何責任, 我們均會即時賠償銀聯信託的一切有關開支及損失。
 - 本人 / 吾等現授權上述人士代表本公司向銀聯信託有限公司簽署任何文件及 / 或為參與計劃之行政運作作出指示。本人 / 吾等並同意對上述人士代表所簽署之有關文件負責。
 - 本人 / 吾等聲明, 盡本人 / 吾等所知及所信, 本表格及隨附之文件 (如有) 所提供的資料均屬正確無訛且無缺漏。

S.V.

Authorised Signature(s) with Company Stamp 有效簽署及公司印章

Date (D / M / Y) 日期 (日 / 月 / 年)

Name 姓名 : (1) _____ (2) _____

Title 職銜 : (1) _____ (2) _____

Remarks 備註 :

- For Corporation, this form needs to be signed by the director(s). 倘為法人公司, 本表格必須由董事簽署。
- For Sole Proprietorship, this form needs to be signed by the Sole Proprietor. 倘為獨資經營公司, 本表格必須由獨資經營者簽署。
- For Partnership, this form needs to be signed by all partners. 倘為合伙經營公司, 本表格必須由所有合夥人士簽署。

BCT Use Only 銀聯信託專用

Date Received:

Input By:

Verified By:

Remarks: