

PIN Re-generation Request Form  
重新編印私人密碼表格

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

PART I. EMPLOYER / MEMBER DETAILS 僱主 / 成員資料		
Name of Plan 計劃名稱	<input type="checkbox"/> Bank Consortium MPF Plan 銀聯信託強積金計劃 <input type="checkbox"/> Bank Consortium Industry Plan 銀聯信託行業計劃	Participating Plan No. 參與計劃編號
Name of Company (if applicable) 公司名稱 (如適用)	English 中文	Membership No. 成員編號
Name of Member (if applicable) 成員姓名 (如適用)	English (Mr / Ms / Mrs*) 中文 (先生 / 小姐 / 女士*)	Casual Employee No. 臨時僱員編號
Contact Details 聯絡資料	Contact Person (Mr / Ms / Mrs*) 聯絡人 (先生 / 小姐 / 女士*) Telephone No. (Day Time) 電話號碼 (日間)	HKID Card / Passport* No. 香港身份證 / 護照*號碼
PART II. REQUEST FOR PIN RE-GENERATION 申請重新編印私人密碼		
<input type="checkbox"/> <b>Participating Employer 參與僱主適用</b> <input type="checkbox"/> Interactive Voice Response System (“IVRS”) 互動電話系統 <input type="checkbox"/> Web 互聯網 <input type="checkbox"/> Both Services 兩個系統 <input type="checkbox"/> <b>Scheme Member 計劃成員適用</b> Note : This PIN can be used for accessing all active accounts with Bank Consortium Trust Company Limited (“BCT”) through IVRS and Web. 備註 : 您可使用此私人密碼經互動電話系統及互聯網登入銀聯信託有限公司(「銀聯信託」)內的所有活躍戶口。		
PART III. PERSONAL INFORMATION COLLECTION STATEMENT 收集個人資料聲明		
<p>The personal data collected from you will only be accessed and handled by properly authorised staff of BCT and its properly authorised service providers and will be used for processing the instructions of this form; administering and managing the contributions and accrued benefits under the Participating Plan; compliance with applicable laws and regulations; marketing our products or services to you; any other purpose relating to the above; and the carrying out of matching procedures with any other personal data for the purpose of running a pension and trust business. If required by law or relevant regulations, BCT may provide such personal data to governmental bodies, regulators or other third parties. If there is any change in the information so 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. To access or correct your personal data held by BCT or to request BCT not to use such personal data for direct marketing purposes, please write to the Data Protection Officer at BCT, 18/F Cosco Tower, 183 Queen’s Road Central, Hong Kong.</p> <p>從您收集之個人資料，僅供銀聯信託正式授權之職員及服務供應商使用及處理，並且會被用作處理此表格之指示；處理和管理參與計劃下之供款及累積權益；遵守法律及規例；向您推銷本公司之產品或服務；與上述有關之任何其他用途；及為經營退休計劃及信託業務而與任何其他個人資料進行核對程序。如因法律或相關規例規定，銀聯信託可向政府機關、監管機構或其他第三者提供有關個人資料。如所提供之資料有任何更改，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。要查閱或更改銀聯信託所持有您的個人資料或要求銀聯信託不再使用其個人資料作直銷之用，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)。</p>		
PART IV. DECLARATION AND SIGNATURE 聲明及簽署		
(1) I / We understand and agree to the terms of the Personal Information Collection Statement as set out in this form. (2) I / We undertake that if there is any change in the information so provided, I / We shall notify BCT as soon as reasonably practicable. (3) 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. (1) 本人 / 吾等明白及同意於此表格之收集個人資料聲明條款。 (2) 本人 / 吾等承諾若所提供之資料有任何更改，將儘快通知銀聯信託。 (3) 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。		
Applicant’s Authorised Signature(s) with Company Stamp (if applicable) 申請人之有效簽署及公司印章 (如適用)		Date (D / M / Y) 日期 (日 / 月 / 年)
Warning : Section 43E of the Mandatory Provident Fund Schemes Ordinance makes it an offence to make a false or misleading statement in a material respect in any document given to an approved trustee in connection with such Ordinance. 注意 : 《強制性公積金計劃條例》第43E條訂明，如在該條例有關連的方面而給予核准受託人的任何文件中在要項上作出虛假或誤導性的陳述，即屬違法。		
BCT USE ONLY 銀聯信託專用		
Date Received / By:	Pin Regenerated On / By:	
Verified By:	Remarks:	

\* Delete as appropriate 請刪去不適用者