

Note 注意

- This Form is only applicable to members who join MPF Exempted ORSO Registered Scheme after 1 December 2000.
此表格只適用於在 2000 年 12 月 1 日後加入獲強積金豁免的職業退休註冊計劃的成員。
- Bank Consortium Trust Company Limited ("BCTC") will redeem units as soon as practicable upon receipt of the duly completed "Employee Termination Notice" [FORM: ETN (ER) - ORSO].
銀聯信託有限公司(「銀聯信託」)會在收到填妥之「僱員離職通知書」 [FORM: ETN (ER) - ORSO]後，儘快贖回基金單位。
- The Minimum MPF Benefits will be transferred according to the following instruction with the remaining vested benefits to be paid out by cheque in favour of the member.
「最低強制性公積金利益」將根據以下指示轉移，餘下的既有利益將以支票形式支付予該成員。
- Please countersign any alterations made in this form. 如須作出任何刪改，請於刪改之位置旁簽署。

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

Part II. Employee Details 僱員資料		
Name of Employee 僱員姓名	English (Mr / Ms / Mrs*)	HKID Card / Passport* No. 香港身份證 / 護照*號碼
	中文 (先生 / 小姐 / 女士*)	Telephone No. (Day Time) 聯絡電話 (日間)
Correspondence Address 通訊地址		

Part III. Minimum MPF Benefits Transfer Options 轉移最低強制性公積金利益的選擇	
I elect to transfer my Minimum MPF Benefits in the Scheme as follows 本人選擇把計劃內的「最低強制性公積金利益」作出以下轉移： (Please mark "✓" in the appropriate box 請於適用的方格內填上 "✓" 號)	
<input type="checkbox"/>	(a) To a personal account under the BCT (MPF) Pro Choice / BCT (MPF) Industry Choice* 轉移至 BCT 積金之選 / BCT(強積金)行業計劃* 內的個人帳戶 (Please complete the "Application Form – Personal Account Member" [FORM: AP(PM)-MT] / [FORM: AP(PM)-IS] 請填寫「個人帳戶成員申請書」 [FORM: AP(PM)-MT] / [FORM: AP(PM)-IS])
<input type="checkbox"/>	(b) To an MPF registered scheme in which my new employer is participating 轉移至本人新僱主就本人開立的強積金帳戶
	Name of New Employer 新僱主名稱 _____
	New Employer's Participation No. 新僱主參與編號 _____
	Name of the Trustee 受託人名稱 _____
	Name of the Scheme 計劃名稱 _____
	Scheme Member's Account No. (if known) 計劃成員帳戶號碼 (如知悉) _____
<input type="checkbox"/>	(c) To my existing / new account in a master trust / industry scheme 轉移至本人在集成信託 / 行業計劃內現有 / 新增之帳戶
	Name of the Trustee 受託人名稱 _____
	Name of the Scheme 計劃名稱 _____
	Scheme Member's Account No. (if known) 計劃成員帳戶號碼 (如知悉) _____

* Delete as appropriate 請刪去不適用者

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 Plan (concerning application records and operational records and / or their dealing / transaction details records) will only be accessed and handled by properly authorised staff of Bank Consortium Trust Company Limited ("BCTC" the trustee of the Plan), BCT Financial Limited ("BCTF", the sponsor of the Plan) and their properly authorised service providers and agents, and may be used, disclosed and / or transferred (whether in or outside Hong Kong) to such persons as BCTC or any of its service providers may consider necessary, including governmental authorities and regulators, for any of the following purposes: (i) exercising or performing the functions conferred or imposed by or under or for the purposes of the Occupational Retirement Schemes Ordinance and Mandatory Provident Fund Schemes (Exemption) Regulation; (ii) providing provident fund services including the processing, administering, managing, and analysing of their, as the case may be, contributions, accrued benefits and portfolios and direct marketing of provident fund services; (iii) improving the provision of provident fund services by BCTC to customers generally (including the facilitation of the provision of services to enable the customers of BCTC generally to access the provident fund (or other) account details through the internet and / or automated teller machine networks such as JETCO); (iv) compliance with applicable laws and regulations, and court order and / or (v) any other purposes for the exercise or performance of the above mentioned functions. If there is any change in the information provided, BCTC should be notified as soon as practicable. Failure to provide the information requested may result in BCTC being unable to process the instructions.

Members and Participating Employers have a right, without any charge, 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 BCTC, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong.

由本計劃成員及參與僱主所提供或相關之個人資料(有關申請及運作記錄)及 / 或他們的買賣 / 交易細節記錄僅供銀聯信託有限公司(「銀聯信託」,本計劃之受託人)、銀聯金融有限公司(「銀聯金融」,本計劃之保薦人)及它們正式授權之服務供應商及代理之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,包括政府機關及監管機構作以下列任何之目的:(一)行使或執行職業退休計劃條例及強制性公積金計劃(豁免)規例下所授予或施加之職能或根據條例及規例的目的而行使或執行職能;(二)提供公積金的服務包括處理、掌管、管理及分析供款、累算權益及投資組合,視乎情況而定,及直銷公積金服務;(三)改善銀聯信託提供予客戶一般之公積金服務(包括協助提供服務以令銀聯信託之客戶可於互聯網及 / 或自動櫃員機網絡例如銀通處理公積金(或其他)戶口資料);(四)遵守適用之法律及規例及法院命令及 / 或(五)任何以行使或執行上述職能作目的之用途。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,在不設任何收費下,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. Authorisation and Declaration 授權及聲明

- (1) I hereby give consent to the Mandatory Provident Fund schemes Authority ("MPFA") to disclose information collected in this form to the trustee(s) concerned, the relevant service provider(s) and other appropriate parties, or to enable such party or parties to access the information for the purposes of processing the transfer of my accrued benefits.
- (2) I understand and agree that the personal data to be supplied in this form is to be used for the purpose(s) of processing my election(s) of transfer as requested in this form.
- (3) I understand and agree that the personal data I supply may, for the purpose(s) mentioned above or for a purpose directly related to such purpose(s), be transferred to the trustee(s) concerned, the relevant service provider(s), the MPFA and other appropriate parties.
- (4) I undertake that if there is any change in the information so provided, I shall notify BCTC as soon as reasonably practicable.
- (5) I declare that to the best of my knowledge and belief, the information given in this form and its attachments is correct and complete.
- (6) I hereby agree to indemnify BCTC against any actions, proceedings, claims, losses, damages, costs or expenses which may be brought against BCTC or suffered or incurred by BCTC arising either directly out of or in connection with BCTC accepting facsimile instructions or e-mail instructions and acting thereon, whether or not the same are confirmed by me in writing. Notwithstanding the above, BCTC has the right to determine which forms or other documents of instructions may or may not be accepted by facsimile or email.

- (1) 本人同意強制性公積金計劃管理局(簡稱「積金局」)可為處理本人的累算權益轉移,向有關受託人、相關服務提供者,及其他相關機構披露本表格所收集的資料,或使該等人士或機構能夠接觸該等資料。
- (2) 本人明白及同意在本表格提供的個人資料,將被用作處理本人在本表格內要求的轉移選擇。
- (3) 本人明白及同意本人所提供的個人資料可能會為達致上述目的,或直接與上述目的有關的目的而轉交有關受託人、相關服務提供者、積金局,及其他相關機構。
- (4) 本人承諾若所提供之資料有任何更改,將儘快通知銀聯信託。
- (5) 本人聲明,盡本人所知及所信,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。
- (6) 本人同意銀聯信託不論在有否得到本人的書面確認下均可接受及處理傳真指示或電郵指示及根據該等指示處理有關事宜,本人亦同意賠償銀聯信託因接受或處理該等傳真指示或電郵指示而直接或間接導致銀聯信託遭受或承受的任何行動、訴訟、理賠、損失、損害、成本或費用。儘管以上所述,銀聯信託有權決定何種表格或其他指示文件能否以傳真方式或電郵方式傳遞。

S.V.

Signature of Applicant 申請人簽署

Date (D / M / Y) 日期 (日 / 月 / 年)

Internal Use Only 內部專用

Date Received:

Input By:

Verified By:

Remarks:

18/F Cosco Tower, 183 Queen's Road Central, Hong Kong
香港皇后大道中183號中遠大廈18樓

Plan Hotline 計劃熱線: 2298 9389

Fax 傳真: 2992 0809

Website 網址: www.bcthk.com