

Important Notice 重要事項:

- During the transfer of accrued benefits between different MPF accounts of Principal MPF Scheme Series 600 and Principal MPF Scheme Series 800. Change of units between Class D and Class I may occur. For details, please refer to the Principal Brochure of the Scheme. 在信安強積金計劃 600 及 800 系列下之不同強積金賬戶於累算權益轉移時，可能涉及 I 類別單位及 D 類別單位的相互轉變，詳情請參閱計劃的主要推銷刊物。
- If you would like to request a copy of the Principal Brochure of your selected scheme, please contact our Customer Service Department at 2827-1233 for a copy. 如欲索取信安強積金計劃的主要推銷刊物，歡迎致電本公司客戶服務部 2827-1233。
- Under Section I, scheme member's name should be the same as that shown on your Hong Kong Identity (HKID) Card. Passport number can only be provided if you do not have Hong Kong Identity (HKID) Card. 第一部份之成員姓名須與身份證上之姓名相同。護照號碼僅供沒有身份證成員填寫。

Please use **BLOCK LETTERS** to complete this Form. 請以正楷填寫本表格

SECTION I **DETAILS OF SCHEME MEMBER**
第一部份 **計劃成員個人資料**

- (1) Scheme Member's Name 成員姓名 _____
Surname 姓氏 _____ Other Name 名字 _____
- (2) HKID Card / Passport* Number 香港身份證 / 護照* 號碼 (* Please delete where inappropriate 請把不適當之處刪除) _____
- (3) Telephone Number 電話號碼 _____ (4) Mobile Number 手提電話號碼 _____
- (5) Fax Number 傳真號碼 _____ (6) E-mail Address 電郵地址 _____
- (7) Correspondence Address _____
通訊地址 _____

SECTION II **CURRENT ACCOUNT INFORMATION**
第二部份 **現有帳戶資料**

- (1) Name of Original Trustee 原受託人名稱 _____
- (2) Name of Original Registered Scheme 原註冊計劃名稱 _____
- (3) Contract Number 合約編號 _____ (4) Member Number 成員編號 _____
- (5) Name of Former Employer (if applicable) 前僱主名稱 (如適用): _____
- (6) Employer's Identification Number (if applicable) 僱主識別號碼 (如適用): _____
- (7) Transfer Reason (For self-employed persons only. Please ✓ the appropriate box.) 轉移原因 (只適用於自僱人士，請在適當空格內加✓。)
- Ceased to be self-employed with effect from 終止自僱的生效日期: _____ (DD/MM/YYYY 日/月/年)
- I will remain in self-employment and my accrued benefits will be transferred to another MPF scheme stated in section III. Contributions to the original scheme should be paid up to: 本人將會維持自僱並把本人的累算權益轉移至第三部份所述的另一個強積金計劃。本人向原計劃供款至最後日期: _____ (DD/MM/YYYY 日/月/年)

SECTION III **CHOICE OF ELECTIONS (please ✓ the appropriate box)**
第三部份 **選擇事項 (請在適當空格內加✓)**

I hereby elect to transfer my accrued benefits derived from mandatory contributions in my account to 本人特此就強制性供款所衍生的累算權益作以下選擇：

Option 選擇 1 -

a Preserved Account under the **SAME** scheme (not applicable to employer sponsored schemes). 轉移至同一集成信託計劃內之保留帳戶 (不適用於僱主營辦計劃)。

Note: You may change the investment fund allocation via Internet, Principal TeleTouch® or by "Change of Investment Choice" form.

注意：若需更改有關投資基金分配比例，可透過互聯網、信安退休理財通® 或更改基金投資分配通知書辦理。

Option 選擇 2 -

a NEW / EXISTING * Preserved Account in **OTHER** registered MPF / Industry* Scheme of approved trustee as follows 轉移至本人下列之受託人的其他集成信託 / 行業* 計劃內的新 / 現有 * 保留帳戶內： (* Please delete where inappropriate 請把不適當之處刪除)

- (1) Name of New Trustee 新受託人名稱 _____
- (2) Name of New Registered Scheme 新註冊計劃名稱 _____
- (3) New Scheme Member Number 新計劃成員編號 _____



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Option 選擇 3 -

a contribution account in a registered scheme with my new employer as follows 轉移到本人新僱主之計劃內之供款戶口:

Note: Once you have chosen this transfer option, your accrued benefit will not be able to be transferred again until employment with your new employer is ceased.

注意: 當閣下已選定此項轉移選擇, 在與新僱主終止僱員合約前, 便不能再將累算權益轉移。

- (1) Name of New Employer 新僱主名稱 _____
- (2) New Employer's Participation Number 新僱主強積金計劃參與證明書號碼 _____
- (3) Name of New Trustee 新受託人名稱 _____
- (4) Name of New Registered Scheme 新註冊計劃名稱 _____
- (5) New Scheme Member Number 新計劃成員編號 _____

SECTION IV ARRANGEMENT OF VOLUNTARY CONTRIBUTIONS (if any) (Please ✓ the appropriate box.)
第四部份 自願性供款 (如有) 的安排 (請在適當空格內加✓)

Note: If you do not make an election under this section but there are accrued benefits derived from voluntary contributions, those benefits will be handled in the same way as those derived from mandatory contributions. If there are no such benefits in your account and you have made an election under section IV, the selected option will not be processed.

備註: 如你沒有在此部份作出選擇, 而累算權益內包含自願性供款, 則該權益將以處理強制性供款所衍生的累算權益以同等方式處理。如你已在第 IV 部份作出選擇, 而帳戶內並無該權益, 則有關選擇將不獲處理。

I elect to have the accrued benefits derived from Voluntary Contributions 本人特此就自願性供款累算權益之處理作以下選擇:

- to be handled in the same way as those derived from Mandatory Contributions. 與強制性供款作同一方法處理。
- to be withdrawn in accordance with the governing rules of the scheme and such payment 根據有關計劃之管限規則以下列方式提取:
- is to be made by cheque and mailed to the correspondence address as shown above. 用支票支付及郵寄到上述之通訊地址。
- is to be deposited directly to my bank account 直接存入本人下列之銀行戶口內:

- (1) Bank No. 銀行編號 (2) Branch No. 分行編號 (3) Account No. 帳戶號碼
- (4) Name of Bank Account 銀行戶口姓名
(cannot be a joint name account of the scheme member 必須為計劃成員之非聯名戶口)
- (5) Name of Bank 銀行名稱

SECTION V TERMINATION OF MPF ACCOUNT WITH NO RESIDUAL BALANCE (IF APPLICABLE)
第五部份 終止沒有剩餘款項的強積金帳戶 (如適用)

I hereby give the original trustee an instruction to terminate my relevant MPF member account as referred to in section II upon transfer of the full accrued benefits to the new trustee and there is no residual balance in the said account. 本人謹此指示原受託人在把本人於第二部所述的強積金成員帳戶內的所有累算權益轉移至新受託人後, 以及在該帳戶內並無剩餘款項的情況下, 終止該強積金成員帳戶。

SECTION VI AUTHORIZATION AND DECLARATION
第六部份 授權及聲明

- (1) I hereby give consent to the 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. 本人同意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) I declare that to the best of my knowledge and belief, the information given in this Form is correct and complete. 本人聲明盡本人所知所信, 本表格所提供的資料正確及詳盡。

SECTION VII PERSONAL INFORMATION COLLECTION STATEMENT
第七部份 個人資料收集說明書

The information and other personal data you have provided to us may be disclosed or transferred to other service providers or member companies of Principal for the purposes of processing your application/instruction. The provision of information and other personal data by you is on a voluntary basis. However, failure to provide us with the information and other personal data as requested may result in us not being able to process your application/instruction. If you wish to access to or to request correction of your personal information held by us, please send your request in writing to: Head of Pension Operations, Principal Insurance Company (Hong Kong) Limited, 11/F, Island Place Tower, 510 King's Road, North Point, Hong Kong. 閣下提供的資料及其他個人資料可能會披露或轉移予其他服務提供者或信安的成員公司以便處理閣下之申請/指示。閣下提供的資料及其他個人資料純屬自願性質。然而, 如未能提供所需資料, 可能導致信安不能處理閣下的申請/指示。閣下如欲查閱或要求更正本公司所持有閣下的個人資料, 請致函「退休金營運部主管, 美國信安保險有限公司, 香港北角英皇道 510 號港運大廈 11 樓」。

SECTION VIII IMPORTANT NOTE
第八部份 重要備註

For electing Principal MPF Scheme only 只適合選擇信安強積金計劃之成員:

I acknowledge that I have read and fully understood the content of the Principal Brochure and the Summary of Constituent Funds and Fees & Charges of the selected Scheme and I agree to the Terms and Conditions pertaining to it. 本人承認已閱讀及了解信安強積金計劃簡介之內容及本人同意有關計劃之條款。

To avoid processing delay, please 為使閣下之申請能儘速辦理, 請

- enclose a photocopy of your HKID Card / Passport for verification in lieu of presenting your HKID Card / Passport in person and, 附上香港身份證/護照副本以作核實, 因此閣下無須為受託人的核對工作親身出示身份證/護照, 及**
- send this form to your new Trustee. However, if you select Option 3, you may either provide this form to your new employer or to the new Trustee. 遞交此表格予新受託人。倘若選定選擇 3, 閣下可遞交此表格予新僱主或新受託人。**



Date (dd/mm/yyyy) 日期 (日/月/年) _____

Signature of Preserved Account Member / Scheme Member
保留帳戶成員或計劃成員簽署 _____