



MPF Account Information
Disclosure Authorization Form
for PRINCIPAL MPF – SMART PLAN
PRINCIPAL MPF – SIMPLE PLAN

信安強積金 - 明智之選 信安強積金 - 易富之選之 強積金帳戶資料披露授權表格

**NOTE 注意:** Please fill in the form with **BLOCK LETTERS.** If you have more than one MPF account at Principal and are served by different MPF intermediaries, please fill in this Disclosure Authorization Form separately for each MPF account. 請以**正楷**填寫本表格。若閣下於信安持有多於一個強積金帳戶,並由不同的強積金中介人提供強積金服務,則每個強積金帳戶需分別填寫此授權表格。

PART I   PERSONAL PARTI     第一部份   個人資料	ICULARS												
Member's Name 成員姓名 (English 英文			(C	hinese	中プ	文)							
Surname 姓													
			HI	KID C	ard /	Passp	ort N	o.* 7	香港」	身份	證 /	護照	景號碼*
First Name 名													
*Please delete where inappropriate * 請删	除不適用者		<b></b>										
PART IIMPF INTERMEDIA第二部份強積金中介人資料	ARY PARTICULARS												
Name of MPF Intermediary (Subsidiary Inter	mediary) 強積金中介人(附属	屬中介人)姓名:											
MPF Registration No. 強積金註冊編號:													
Name of Principal Intermediary 主事中介人	名稱:												
	) <b>TO BE AUTHORIZED</b> (A 「 <i>請於適當位置加上</i> ✓號		ropriai	e box.	)								
MPF Scheme 強積金計劃	Account type 帳戶類別												
	☐ Personal Account	☐ Self-Employed	Perso	n Acc	ount		Fmr	love	e Coi	ntribi	ution	Acc	ount

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## PART IV MEMBER AUTHORIZATION

第四部份 成員授權

I hereby authorize Principal Trust Company (Asia) Limited to disclose and transfer my personal information and account information as specified below ("Information") to my MPF Intermediary (including Principal Intermediary and Subsidiary Intermediary) mentioned in Part II in order to assist me to manage my Principal MPF Accounts mentioned in Part III ("Accounts") with immediate effect. Information that I wish to be disclosed and transferred shall include:

Personal Information - include Date of Birth, Tel. no., address, email address and fax no.;

Account Information – include scheme effective date, contract status, contract number, accrued benefits, total account balance, account balance by fund, details of fund transaction, transfer-in details and amount, investment allocation, investment return, contribution history and any operations and outstanding issues of the Accounts.

本人即時授權信安信託(亞洲)有限公司向第二部份列出的強積金中介人(包括主事中介人及附屬中介人)披露及轉移本人以下之個人資料及帳戶 資料(該等資料簡稱「資料」)以協助本人管理於第三部份列出的信安強積金帳戶(簡稱「帳戶」)。本人欲披露及轉移的有關資料將包括:個 人資料 - 包括出生日期、聯絡電話、地址、電郵地址及傳真號碼;

帳戶資料 - 包括計劃生效日期、合約狀況、合約編號、帳戶累算權益、帳戶結存、帳戶結存內基金分佈之詳情、單位交易詳情、累算權益轉入 詳情及金額、投資選擇、投資回報、供款紀錄及任何涉及帳戶運作及需解決的事項。

## PART VDECLARATION第五部份聲明

- 1. The MPF intermediary ("Subsidiary Intermediary") has confirmed me that (i) he/she holds valid licenses issued by the relevant regulatory/governmental authority; and (ii) he/she shall comply with the provisions of the Personal Data (Privacy) Ordinance when using or handling the Information. 強積金中介人(附屬中介人)已向本人確認(i)他/她持有相關監管/政府機構所發出的有效牌照;及(ii)當使用及處理本人的資料時,他/她應遵守個人資料(私隱)條例的規定。
- 2. I hereby acknowledge and accept that (i) Principal makes no representation and accepts no legal responsibility for the services, the accuracy and completeness of the Information provided and/or used by the Principal Intermediary and/or the Subsidiary Intermediary; and (ii) Principal shall not be held liable for any damages caused to me which may arise out of or in connection with the misuse of the Information or disclosure of the Information to any third party/parties by the Principal Intermediary and/or the Subsidiary Intermediary; and 本人確認及接納(i)信安不會對主事中介人及/或其附屬中介人所提供的服務、其提供資料的準確性及完整性及/或對資料之使用作出任何陳述或承擔任何責任;及(ii)信安亦不會就主事中介人及/或其附屬中介人誤用資料及/或披露資料予任何第三者而導致本人招致的任何損失承擔法律責任;及
- 3. This authorization shall take effect on the date of this form and remain in force unless and until (i) it is revoked by me by submitting the **Information Disclosure Cancellation Form**; and (ii) Principal has been notified of and has received the **Information Disclosure Cancellation Form**. 本授權表格於簽署日起生效並繼續有效直至(i) 本人遞交**資料披露 取消表格**;及(ii) 信安被知會及收到該**資料披露 取消表格**為止。
- 4. The **Information Disclosure Cancellation Form** shall take effect from the date of the Form or within 3 business days which Principal receives the Form, whichever is the later. 資料披露 取消表格將於本人簽署表格當日或於信安收到表格後 3 個工作天內(以較後者為準)生效。

Signature of Member 成員簽署		Date 日期			
PART VI 第六部份	MPF INTERMEDIARY DECLARATION 強積金中介人擊明				

I declare and confirm that I shall comply with the Personal Data (Privacy) Ordinance, the Mandatory Provident Fund Schemes Ordinance and all other applicable ordinances and rules, guidelines and code of conduct issued by (or as amended from time to time) the relevant authorities when using the above Member's Information. 本人謹此聲明並作出保證本人於使用以上成員的資料時會遵守個人資料(私隱)條例、強制性公積金計劃條例及由相關機構不時發出的條例、規例、指引及守則。

Signature of MPF Intermediary 強積金中介人簽署	Date 日期
Contact Number 聯繫電話	-
For Office Use Only 公司專用	
Verified By:	Date:

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