



FORM MPF(S) – W(O) 表格

Website 網址: www.htisec.com/asm

**MANDATORY PROVIDENT FUND SCHEMES ORDINANCE (CAP 485)
(the Ordinance)**

《強制性公積金計劃條例》(第 485 章) (《條例》)

**CLAIM FORM FOR PAYMENT OF MPF ACCRUED BENEFITS (BENEFITS) ON GROUNDS OF
PERMANENT DEPARTURE FROM HONG KONG / TOTAL INCAPACITY /
TERMINAL ILLNESS / SMALL BALANCE / DEATH**

基於永久性地離開香港／完全喪失行為能力／罹患末期疾病／小額結餘／死亡的理由
而申索強積金累算權益(「權益」)的表格

Please read the following **important notes** before completing this Form.

填寫本表格前，請先閱讀以下**重要資料**：

Filling In This Form 填寫本表格

(a) *This Form is to be completed by any person who wishes to claim for payment of benefits from an MPF registered scheme (scheme) on the grounds of permanent departure from Hong Kong, total incapacity, terminal illness, small balance or death. For a claim for payment of benefits on the grounds of attaining the retirement age of 65 or early retirement, please use Form MPF(S) – W(R).*

本表格僅供擬基於永久性地離開香港、完全喪失行為能力、罹患末期疾病、小額結餘或死亡的理由提出申索，要求從一個強積金註冊計劃(「計劃」)提取權益的人士填報。若基於已達到 65 歲退休年齡或提早退休的理由申索權益，請填寫第 MPF(S) – W(R) 號表格。

(b) *If the claimant / scheme member wishes to withdraw benefits from more than one scheme, please fill in a separate form for each scheme.*

如申索人／計劃成員擬從多於一個計劃提取權益，須就每個計劃填寫一份表格。

(c) *Please submit the completed form and the required supporting documents to the trustee of the scheme concerned for processing the claim. If any information provided is incorrect or incomplete, the relevant trustee may not be able to process your request.*

請把填妥的表格及所需證明文件交予有關計劃的信託人，以便處理有關申索。若提供的任何資料不正確或不完整，有關信託人可能無法處理您的申請。

(d) *Please read the explanatory notes carefully before completing this Form.*

填寫本表格前，請先細讀註釋。

(e) *The personal data to be supplied in support of this claim for payment of benefits are to be used for processing your claim. The personal data you supply may, for such purpose, be transferred to the relevant service provider(s) and the government or regulatory bodies including the Mandatory Provident Fund Schemes Authority (the Authority).*

就此項申索權益申請提供的個人資料，將用作處理您的申索。您提供的個人資料可能會為該目的而轉交相關服務提供者及政府或規管機構，包括強制性公積金計劃管理局(「管理局」)。

Reminder Before Submitting a Claim 提交申索前須注意的事項

(f) *Withdrawal of benefits derived from voluntary contributions paid pursuant to section 11 of the Ordinance is subject to the governing rules of the scheme concerned. Please check the information from the offering document of the scheme concerned, which can be found on the website of the trustee of the scheme concerned. Please consult the relevant trustee for details.*

就依據《條例》第 11 條支付的自願性供款所產生的權益而言，提取權益須受有關計劃的管限規則所規限。詳情請查閱有關計劃的要約文件，而要約文件可於有關計劃信託人的網站閱覽。詳情請向有關信託人查詢。

- (g) *Withdrawal of benefits derived from tax deductible voluntary contributions paid pursuant to section 11A of the Ordinance is subject to the same withdrawal requirements as for mandatory contributions (except that under section 11A(3), certain provisions relating to offsetting of severance or long service payments, and protection of benefits from creditors and others, do not apply).*

就依據《條例》第11A條存入的可扣稅自願性供款所產生的權益而言，提取權益須受與強制性供款相同的提取規定所規限（惟根據第11A(3)條，若干與抵銷遣散費或長期服務金有關，以及與保障債權人及其他人士的權益有關的條文並不適用）。

Reminder 請注意

- *Withdrawal of benefits out of a guaranteed fund may result in some or all of the guarantee conditions not being satisfied; thus affecting your entitlement to the guarantee. Please check the offering document of the scheme or consult the relevant trustee for details.*
若從保證基金提取權益，可能導致計劃成員不符合部分或所有保證條件，以致影響其享有保證的資格。詳情請查閱計劃的要約文件或向有關信託人查詢。
- *The price of fund units may change due to market fluctuations and may go down as well as up. The price of fund units on the date when you submit a claim form to the trustee may be different from that on the date when the fund units are redeemed.*
基金單位價格會因市場波動而出現變化，單位價格可跌亦可升。您向信託人提交申索表格當日的基金單位價格，或會與贖回基金單位當日的價格有所不同。
- *If you have reached, or are approaching, the age of 50 and your benefits are currently invested according to the default investment strategy (DIS) of the scheme, you should be aware that the de-risking mechanism of the DIS starts at the age of 50. If the annual de-risking of your investments in the DIS and your claim for payment of benefits take place at around the same time, the trustee of the scheme shall sequence the de-risking and the claim in accordance with its procedures and in compliance with the Ordinance. Please consult the trustee of the scheme if you wish to know the details of how it will handle these transactions.*
如您已年滿或快將年滿50歲，而現時您的權益是按照計劃的預設投資策略投資，請留意預設投資策略的降低投資風險機制，會由計劃成員年滿50歲開始運作。如計劃的信託人在預設投資策略下按年降低您的投資風險的時間，與接獲您的申索權益申請的時間相當接近，該計劃的信託人將根據其運作程序及在符合《條例》規定的情況下，訂定處理降低風險及申索權益的次序。如欲瞭解計劃信託人如何處理該等交易，請向信託人查詢詳情。

Enquiries 查詢

- (h) *Please contact the relevant trustee for enquiries about account details and information on specific schemes or funds.*
如欲查詢帳戶詳情及個別計劃或基金的資料，請聯絡有關信託人。
- (i) *For general enquiries regarding a claim for payment of benefits, please contact the relevant trustee or the Authority (email: mpfa@mpfa.org.hk or hotline: 2918 0102).*
有關申索權益的一般查詢，請聯絡有關信託人或管理局（電郵地址：mpfa@mpfa.org.hk 或熱線電話：2918 0102）。
- (j) *Please send the completed form and required supporting documents to the Administrator: Member Services, Fund Services Hong Kong, HSBC Institutional Trust Services (Asia) Limited, P.O. Box 73448, Kowloon Central Post Office, Hong Kong.*
請將填妥表格及所需證明文件寄往香港九龍中央郵政局郵政信箱73448號，滙豐機構信託服務（亞洲）有限公司，退休金行政部予您的行政管理人處理。

SECTION I – DETAILS OF THE CLAIMANT ^{Note 1} / SCHEME MEMBER

第一部分 - 申索人^{註 1} / 計劃成員資料

(1) CLAIMANT DETAILS 申索人資料					
Name ^{Note 2} <i>(as shown on your Hong Kong Identity (HKID) Card)</i> 姓名 ^{註 2} (與您的香港身份證上的姓名相同):	Surname: 姓氏:				
	Other Name: 名字:				
Identification 身份證明	HKID Card No.: 香港身份證號碼:				
	Passport No.: 護照號碼: <i>(ONLY for person without HKID Card) (本欄僅供沒有香港身份證的人士填寫)</i>				
Contact Details 聯絡資料	Daytime Phone No.: 日間聯絡電話號碼:		Mobile Phone No.: 手提電話號碼:		
	Email Address: 電郵地址:				
Correspondence Address 通訊地址	Flat / Room 室	Floor 樓	Block 座	Building 大廈	
	Estate 屋邨			Street No. 街道號碼	Street 街道
	District / Country (if not Hong Kong) 地區/國家 (如非香港地區)			Hong Kong / Kowloon / New Territories <i>(delete whichever is not applicable)</i> 香港/九龍/新界 (請刪去不適用者)	

(2) SCHEME MEMBER DETAILS (if different from the claimant) 計劃成員資料 (如與申索人不同)	
Name ^{Note 2} <i>(as shown on your Hong Kong Identity (HKID) Card)</i> 姓名 ^{註2} (與您的香港身份證上的姓名相同)	Surname: 姓氏：
	Other Name: 名字：
Identification 身份證明	HKID Card No.: 香港身份證號碼：
	Passport No.: <i>(ONLY for scheme member without HKID Card)</i> 護照號碼： (本欄僅供沒有香港身份證的計劃成員填寫)

SECTION II – DETAILS OF THE CLAIM 第二部分 - 申索資料

(1) ACCOUNT INFORMATION (please ✓ the appropriate box) 帳戶資料 (請在適用方格加上✓號)	
Name of Scheme 計劃名稱	
<input type="checkbox"/> All accounts under the Scheme 計劃內所有帳戶	
<input type="checkbox"/> Selected account(s) under the Scheme <i>(please specify the scheme member account no. ^{Note 3})</i> 計劃內的指定帳戶 (請註明計劃成員帳戶號碼 ^{註3})	(1)
	(2)
	(3)

(2) **GROUNDINGS FOR CLAIMING BENEFITS AND THE REQUIRED DOCUMENTS** ^{Notes 4 & 5} (please ✓ the appropriate box) 申索權益的理由及所需文件^{註4,5} (請在適用方格加上✓號)

Grounds 理由	Required documents 所需文件
<input type="checkbox"/> Permanent departure from Hong Kong 永久性地離開香港	<input type="checkbox"/> a copy of the scheme member's HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification ^{Note 6} ; 計劃成員的香港身份證副本，以供核對其姓名及身份證號碼（如不擬親身出示計劃成員的香港身份證供核對有關資料） ^{註6} ；
	<input type="checkbox"/> a copy of the documents / evidence that the scheme member is permitted to reside in a place other than Hong Kong (e.g. immigration visa / foreign passport) ; 准予計劃成員在香港以外某地方居住的文件／證明文件副本（例如移民簽證／外國護照）；
	<input type="checkbox"/> the original statutory declaration form on permanent departure (Form MPF(S) – W(SD2)) ^{Notes 5 & 7} ; 有關永久性地離開香港的法定聲明表格（第 MPF(S) – W(SD2)號表格） ^{註5,7} 正本；
	<input type="checkbox"/> a copy of the Letter of Release issued by the Inland Revenue Department, if applicable; and 稅務局發出的同意釋款書副本（如適用）；及
	<input type="checkbox"/> information on overseas settlement: 海外定居資料：
	Place other than Hong Kong where the scheme member is permitted to reside: 計劃成員在香港以外獲准居住的地方：
	Address: 地址：
	Telephone no.: 電話號碼：
Fax no.: 傳真號碼：	
Email address: 電郵地址：	
Departure reason(s): 離港原因：	<input type="checkbox"/> Emigration 移民 <input type="checkbox"/> Family reunion 家庭團聚 <input type="checkbox"/> Marriage 結婚 <input type="checkbox"/> Retirement 退休 <input type="checkbox"/> Long-term overseas employment 長期海外受聘 <input type="checkbox"/> Others (please specify) 其他（請註明）：

Grounds 理由	Required documents 所需文件
<input type="checkbox"/> Total incapacity 完全喪失行為能力	<input type="checkbox"/> a copy of the scheme member's HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification ^{Note 6} ; and 計劃成員的香港身份證副本，以供核對其姓名及身份證號碼（如不擬親身出示計劃成員的香港身份證供核對有關資料） ^{註6} ；及 <input type="checkbox"/> a copy of the medical certificate certifying total incapacity (Form MPF(S) – W(M)) ^{Notes 8 & 9} 證明計劃成員完全喪失行為能力的醫學證明書（第 MPF(S) – W(M) 號表格） ^{註8及9} 副本
<input type="checkbox"/> Terminal illness ^{Note 10} 罹患末期疾病 ^{註10}	<input type="checkbox"/> a copy of the scheme member's HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification ^{Note 6} ; and 計劃成員的香港身份證副本，以供核對其姓名及身份證號碼（如不擬親身出示計劃成員的香港身份證供核對有關資料） ^{註6} ；及 <input type="checkbox"/> a copy of the medical certificate certifying terminal illness dated not earlier than 12 months before the date on which the claim is lodged (Form MPF(S) – W(T)) ^{Note 8} 在提交申索日期之前的 12 個月內簽發的證明計劃成員罹患末期疾病的醫學證明書（第 MPF(S) – W(T) 號表格） ^{註8} 副本
<input type="checkbox"/> Small balance 小額結餘	<input type="checkbox"/> a copy of the scheme member's HKID card for verification of the name and identity card number of the scheme member if the claimant does not wish to present the card in person for verification ^{Note 6} ; and 計劃成員的香港身份證副本，以供核對其姓名及身份證號碼（如不擬親身出示計劃成員的香港身份證供核對有關資料） ^{註6} ；及 <input type="checkbox"/> the original statutory declaration form on small balance (Form MPF(S) – W(SD3)) ^{Notes 5 & 7} 有關小額結餘的法定聲明表格（第 MPF(S) – W(SD3) 號表格） ^{註5,7} 正本
<input type="checkbox"/> Death 死亡	<input type="checkbox"/> a copy of the claimant's HKID card for verification of the name and identity card number of the claimant if the claimant does not wish to present the card in person for verification ^{Note 6} ; and 申索人的香港身份證副本，以供核對其姓名及身份證號碼（如不擬親身出示申索人的香港身份證供核對有關資料） ^{註6} ；及 <input type="checkbox"/> a copy of the Letter of Probate or Letters of Administration granted by the Probate Registry / a letter requesting withdrawal of the benefits issued by the Official Administrator if the claim is made by the Official Administrator* 遺產承辦處發出的遺囑認證書或遺產管理書副本 / （如申索是由遺產管理官提出）遺產管理官發出要求提取權益的信件*

(3) METHOD OF PAYMENT (please ✓ the appropriate box) 付款方法 (請在適用方格加上✓號)

In absence of any payment method or rejected payment by bank transfer, the benefits may be paid by cheque in Hong Kong Dollars and to be sent to the correspondence address. If you do not select any payment currency in your instruction below, the payment will be denominated in Hong Kong Dollars. 在沒有提供任何付款方式或銀行轉賬款項被拒絕的情況下，有關權益可能會安排以港幣支票付款郵寄往通訊地址。如您在下方沒有勾選任何付款貨幣，付款將會以港幣為貨幣單位。

- (i) by cheque and send to my correspondence address 支票及寄往本人通訊地址
(bank charge will be incurred for foreign currency cheque, as applicable 以外幣支票付款銀行或會收取服務費用)

Hong Kong dollars 港幣 United States dollars (Local Bank) 美元 (本地銀行)

OR 或

- (ii) by depositing directly into my bank account under my name 直接存入本人之銀行賬戶
(Please note that third party bank account is not acceptable and any bank charges incurred (including payee bank and receiving bank) in the remittance and / or currency conversion will be borne by the account holder. (請注意：不接受第三者名義開立的銀行帳戶及銀行(包括支款銀行及收款銀行)可就匯款及/或貨幣轉換收取費用，而有關費用將由戶口持有人支付。))

(Local Bank only 只限本地銀行)

Hong Kong dollars 港幣 United States dollars 美元

Name of bank account holder: 銀行帳戶持有人：
Name of Bank: 銀行名稱：
Bank account number: 銀行帳戶號碼：

OR 或

(Overseas Bank only 只限海外銀行)

(Please complete this part in English, it may delay the payment process if the information provided below is incomplete or incorrect 請以英文填寫以下部份，如下述資料不完整或不正確，將可能延誤處理付款程序)

Hong Kong dollars 港幣

United States dollars 美元

Name of bank account holder: 銀行帳戶持有人：	
Name of Bank: 銀行名稱：	
Bank account number: 銀行帳戶號碼：	
<i>For overseas bank only:</i> 只適用於海外銀行：	Overseas Bank's Detailed Address: 海外銀行的詳細地址：
	Name of Correspondent Bank in Hong Kong*: 香港的代理銀行名稱*：
	Swift Code / ABA No. (if applicable): 全球金融同業電信協會代碼／美國銀行協會號碼（如適用）：
	Other settlement information (if any): (e.g. IBAN) 其他結算資料（如有）：（例如 IBAN）
	*The administrator will determine the correspondent bank if no or incomplete information is provided. In such case, the payment may be delayed. 資料有任何遺漏或不完整，將由行政管理人自行決定所屬代理銀行。在此情況下，付款指示將可能被延遲。

SECTION III – AUTHORIZATION & DECLARATION 第三部分 – 授權及聲明

<p>(1) TERMINATION OF MPF ACCOUNT WITH NO RESIDUAL BALANCE (IF APPLICABLE) 終止沒有剩餘款項的強積金帳戶（如適用）</p>	
<p>I / We* ^{Note 1} hereby authorize the trustee to terminate the relevant scheme member account(s) as referred to in Section II(1) upon 本人／我們^{**1} 謹此授權信託人在以下情況終止在第(II)(1)部所述的計劃成員帳戶：</p> <p>(i) withdrawal of the full amount of benefits with no residual balance in the said account(s); 該帳戶內的權益已被全數提取，並無剩餘款項；</p> <p>(ii) (for employee contribution account only) termination of the employment in relation to the contribution account; and (只適用於僱員供款帳戶) 該供款帳戶所涉及的受僱已經終止；及</p> <p>(iii) (for self-employed person contribution account only) cessation of the self-employment, with effect from _____ (DD / MM / YYYY). (只適用於自僱人士供款帳戶) 終止自僱，生效日期為 (日/月/年)。</p>	
<p>(2) FOR CLAIM FOR PAYMENT OF BENEFITS ON GROUNDS OF TOTAL INCAPACITY ONLY 只適用於基於完全喪失行為能力的理由而要求支付權益的申索</p>	
<p>For the claim for payment of benefits on the grounds of total incapacity, I / we* ^{Note 1} hereby declare that I / the scheme member* last performed the relevant kind of work as set out in the medical certificate (Form MPF(S)-W(M)) before becoming totally incapacitated or the “Certificate of an employee’s permanent unfit for a particular type of work” ^{Note 9} and that contract of employment has been terminated.</p> <p>本人／我們^{**1} 謹此就基於完全喪失行為能力的理由而要求支付權益的申索作出聲明，本人／計劃成員*在完全喪失行為能力前，最後是執行醫學證明書（第 MPF(S) – W(M)號表格）或「證明僱員永久不適合擔任某類工作的證明書」^{**9}所載有關類別的工作，而該僱傭合約已經終止。</p>	
<p>(3) DECLARATION 聲明</p>	
<p>I / We* ^{Note 1} declare that to the best of my / our* knowledge and belief, the information given in this Form and its attachments is correct and complete.* 本人／我們^{**1} 聲明，盡本人／我們*所知所信，本表格及隨附文件所提供的資料均屬正確無訛且無缺漏*。</p> <p>I / We understand that my / our instruction given previously, as to whether I / We wish to / wish not to receive any marketing materials in relation to the Plan from the Sponsor, will continue to be in force unless I / We complete and submit a “Change of Particulars For Members / Self-Employed Person” form to change my / our consent. 本人／我們明白本人／我們之前提交的指示，就關於本人／我們是否希望收取保薦人海通國際投資經理有限公司有關強積金計劃的推廣資料將會保持效力，除非本人／我們完成並提交了更改成員／自僱人士資料表格。</p> <p>I / We confirm that there is no change of my / our nationality, residential address and other relevant identification document as provided to the Trustee. 本人／我們確認就本人／我們的國籍、住址及已提供予信託人的其他該等身份證明文件均維持不變。</p>	
Signature of the claimant(s) 申索人簽署	Date (DD / MM / YYYY) 日期 (日/月/年)

* delete whichever is not applicable * 刪除不適用者

✦ **Warning:** Under section 43E of the Ordinance, a person who, in any document given to the Authority or an approved trustee, knowingly or recklessly makes a statement which is false or misleading in a material respect commits an offence and is liable to a maximum penalty of a \$100,000 fine and one year's imprisonment on the first conviction and a \$200,000 fine and two years' imprisonment on each subsequent conviction. A person who knowingly and wilfully makes a statutory declaration false in a material particular also commits an offence under section 36 of the Crimes Ordinance (Cap 200) and is liable on conviction to imprisonment for two years and to a fine.

✦ **注意** : 根據《條例》第 43E 條，任何人在給予管理局或核准信託人的任何文件中，明知或罔顧後果地作出在要項上屬虛假或具誤導性的陳述，即屬犯罪。首次定罪者，最高可處罰款\$100,000 及監禁一年；其後每次定罪，最高可處罰款\$200,000 及監禁兩年。根據《刑事罪行條例》（第 200 章）第 36 條，任何人明知而故意在法定聲明中作出在要項上屬虛假的陳述，亦屬犯罪。一經定罪，可處監禁兩年及罰款。

SECTION IV - Personal Data Collections Statement 第四部 個人資料收集聲明

I agree that:

本人同意：

1. Subject to any applicable laws of Hong Kong Special Administrative Region, information supplied on any schedule or Form and otherwise in connection with my participation in the Plan may be used for one or more of the following purposes: (i) processing my participation in the Plan, including but not limited to administering and managing my contributions and accrued benefits under the Plan, e.g. carrying out my instructions or responding to any enquiry purporting to be given by me or on my behalf, and dealing in any other matters relating to my participation in the Plan (including the mailing of reports or notices), (ii) complying with an order of any court and observing any legal, governmental or regulatory requirements of any relevant jurisdiction (including any disclosure, reporting or notification requirements to which any recipient of the data is subject, e.g. tax reporting requirements under the Inland Revenue Ordinance and its provisions) and, (iii) to provide a marketing database for MPF product and market research if it is / they are relevant to the Plan, to conduct direct marketing activities of MPF products and / or MPF services only if my consent is obtained or to provide information for the dispatch of information on other products or services to me from the Plan's Sponsor "Haitong International Investment Managers Limited" ("Sponsor") or any connected person of the Sponsor if such products or services relate to the Plan. To the extent not prohibited by the MPF legislations and / or the Personal Data (Privacy) Ordinance ("PDPO"), all of such information may be retained after I have ceased to participate in the Plan.

根據香港特別行政區的適用法律，本人參與計劃相關表格或其他文件上所提供的資料，會將用作以下目的：(i) 處理本人參與強積金計劃的相關事宜包括但不限於處理參與計劃中的累積權益，執行本人的指示、回應本人的查詢或回應宣稱代本人作出的查詢、處理本人參與強積金計劃相關的其他事宜（包括寄發報告或通知書），(ii) 遵守任何法律的命令及司法權區的法律、政府、監管規定（包括收集這些數據而須作出披露、報告或通知的規定，如稅務局及相關規定下的稅務報告），(iii) 為強積金產品或市場研究作為營銷的數據庫（如與強積金計劃有關）、只限於強積金產品及／或強積金服務的市場推廣用途（如獲得本人同意）、保薦人海通國際投資經理有限公司（“保薦人”）或其關連人士須向本人寄發其他產品或服務資料而需要的資料（如與強積金計劃有關）。在個人資料（私隱）條例及／或強積金法例不禁止的前提下，即使本人不再參與強積金計劃，所有這些資料仍會被保留。

2. Upon request, I am entitled under the PDPO to be informed by the Sponsor whether it holds personal data as defined under PDPO about me and to request access to and / or correction of any such data. I also have the right to inform the Sponsor at any time if I do not wish to receive any marketing materials in relation to the Plan. Any such request may be made by post to the Client Services Officer, Haitong International Investment Managers Limited, 22/F, Li Po Chun Chambers, 189 Des Voeux Road Central, Hong Kong.

本人可要求並有權根據個人資料（私隱）條例而了解保薦人是否持有個人資料（私隱）條例所界定有關本人的個人資料，並可要求查閱及／或更改任何這些資料。本人有權隨時通知保薦人本人不希望再收取與強積金計劃相關的推廣資訊的意願。有關要求可以書面方式寄發到向海通國際投資經理有限公司的客戶服務部（地址為香港德輔道中 189 號李寶椿大廈 22 樓）。

3. HSBC Provident Fund Trustee (Hong Kong) Limited (the "Trustee") may, for the purposes stated above (excluding the purpose under paragraph 1(iii) above, which is not applicable to the Trustee), directly or indirectly, disclose and transfer such information to the auditors of the Plan and the Sponsor, including any of their employees, officers, directors and agents, and / or to the ultimate holding company of the Sponsor and the Trustee, and / or their subsidiaries and / or affiliates or to any third party service provider, agent or delegate employed to provide services or hardware such as administrative, computer, operational support or other services or facilities which are relevant to or in connection with operation of the Plan. The Trustee may also make disclosure or transfer data, directly or indirectly, to any judicial, governmental or regulatory authority entitled thereto by law or regulation (whether such authorities are statutory or not). Provision of data made by the Trustee pursuant to this clause may be to any persons outside Hong Kong.

HSBC Provident Fund Trustee (Hong Kong) Limited（“信託人”）（不包括上文第 1(iii)段所述的目的，即不適用於信託人）可能需要直接或間接向某些人士披露和轉交這些資料，這些人士包括強積金計劃和保薦人（包括其僱員、高級人員、董事及代理）的核數師及／或保薦人及託管人的最終控股公司及／或其附屬公司及／或聯屬公司，或受委聘負責向接收或獲轉交數據的人士提供行政、電腦、服務、操作協助或與運營計劃相關的設施的第三方。信託人亦可能需要就本人參與的強積金計劃直接或間接向有權按照法律法規的司法、政府或監管機構（不論是否法定機構）披露或轉交數據。信託人根據本條款所提供的數據或會向位於香港境外的人士提供。

4. Applicable for the Employer and Self-Employed Persons: I am required to provide the information supplied on the Form or otherwise in connection with my participation in the Plan, I understand that if I do not provide such information, the Trustee will not be able to properly process my membership and benefits under the Plan. I have the right to obtain access and to request correction of any personal information concerning myself held by the Trustee. Request for such access can be made in writing and addressed to HSBC Provident Fund Trustee (Hong Kong) Limited, P.O. Box 73448, Kowloon Central Post Office, Hong Kong.

適用於僱主和自僱人士：本人需要提供表格上提供的資料或與本人參與強積金計劃有關的資料，本人明白如本人不提供這些資料，信託人將不能適當處理本人的強積金計劃的會籍和福利。本人有權查閱信託人持有有關本人的個人資料及要求修改這些個人資料。本人可發出書面要求並寄發到 HSBC Provident Fund Trustee (Hong Kong) Limited（地址為香港九龍中央郵政局郵政信箱 73448 號）查閱個人資料。

5. I understand and agree that the Sponsor, "Haitong International Investment Managers Limited" and / or the Trustee of the Plan may request from me, both upon this application and during such time as I am a member of the Plan, such evidence and / or documentation as any of them may require to fulfill their obligations under applicable law, regulation or regulatory policy, including but not restricted to, laws, regulations or guidelines addressing anti-money laundering and tax reporting, and I shall provide such information.

本人明白及同意保薦人海通國際投資經理有限公司及／或計劃的信託人可在遞交本申請時及本人身為計劃成員期間，要求本人提交履行本人的責任而可能需要的該等證明及／或文件。該責任根據適用法例、規例或規管政策，包括但不限於有關反洗黑錢的法例、規例或指引及稅務報告，而本人亦必須提供該等資料。

Explanatory Notes on

Claim Form for Payment of MPF Accrued Benefits (Benefits) on Grounds of Permanent Departure from Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death (Form MPF(S) – W(O))

基於永久性地離開香港／完全喪失行為能力／罹患末期疾病／小額結餘／死亡的理由而申索強積金累算權益（權益）的表格

（第 MPF(S) – W(O) 號表格）

註釋

- (1) (i) For a claim made on the grounds of death, only personal representatives within the meaning of the Mandatory Provident Fund Schemes Ordinance can be the claimant to act on behalf of the deceased scheme member to claim for payment of the scheme member's benefits. This includes a personal representative within the meaning of the Probate and Administration Ordinance (Cap 10) and the Official Administrator who gets in and administers an estate of a deceased scheme member in a summary manner without a grant or other legal formality under section 15 of that Ordinance. If there is more than one personal representative and the personal representatives have not authorized one of the representatives to act on behalf of other representatives to lodge the claim, all the personal representatives should submit the Claim Form jointly. Please use an additional blank sheet to provide details of the claimants under Section I. Under such circumstances, this Form needs to be signed by all of the personal representatives.

基於死亡的理由而提出的權益申索，只可由《強制性公積金計劃條例》所界定的遺產代理人作為申索人，代表已故計劃成員提出。這些人包括由《遺囑認證及遺產管理條例》（第 10 章）所界定的遺產代理人及按該條例第 15 條，在無須任何授予書或其他法律手續的情況下，將已故計劃成員的遺產收集及以簡易方式管理的遺產管理官。假如遺產代理人超過一名，而該些遺產代理人並未授權其中一人作為申索代表，則申索表格須由所有遺產代理人聯名提交。請就第 I 部另紙詳載各申索人的資料。在這情況下，本表格須由所有遺產代理人聯署。

- (ii) For a claim made on all other grounds of permanent departure from Hong Kong, total incapacity, terminal illness or small balance, either the scheme member or person(s) appointed as a committee of the estate of a mentally incapacitated person under the Mental Health Ordinance (Cap 136) (the committee of the estate) to act on behalf of the scheme member can be the claimant to lodge the claim for payment of benefits. If there is more than one person appointed by the court as the committee of the estate, those persons should apply and sign in the capacity as the committee of the estate in accordance with those terms of appointment and any other requirements contained in the relevant court order. Please use an additional blank sheet to provide details of the claimants under Section I. Under such circumstance, this Form needs to be signed by all of the persons appointed by the court as the committee of the estate, unless the Court authorizes otherwise.

基於所有其他理由（即永久性地離開香港、完全喪失行為能力、罹患末期疾病或小額結餘）而要求支付權益的申索，可由計劃成員或根據《精神健康條例》（第 136 章）獲委任代表精神上無行為能力的計劃成員行事的產業受託監管人（產業受託監管人）作為申索人提出。如法庭委任超過一人為產業受託監管人，該等人士應按照委任條款及有關法庭命令所載的任何其他規定，以產業受託監管人的身份提出申請及在相關文件簽署。請就第 I 部另紙詳載各申索人的資料。在此情況下，除非法庭另有授權，否則本表格須由所有獲法庭委任為該計劃成員的產業受託監管人的人士簽署。

- (2) If a claimant / scheme member does NOT possess a HKID Card, please fill in the name as shown on the passport.
如申索人／計劃成員沒有香港身份證，請填上護照上的姓名。

- (3) Scheme member account number can be found:
計劃成員帳戶號碼可循以下途徑查閱／查詢：

- (i) in the membership certificate, notice of acceptance, or notice of participation; or
查閱成員證明書、接納通知或參與通知；或
- (ii) in the annual benefit statement, or other statements provided by the trustee; or
查閱周年權益報表或信託人提供的其他報表；或
- (iii) through the member enquiry facilities available from the trustee.
信託人為成員提供的諮詢服務。

If you are in doubt, please contact the trustee of the MPF registered scheme (scheme) concerned.
如有疑問，請與有關強積金註冊計劃（計劃）的信託人聯絡。

- (4) In processing a claim for payment, the trustee of the scheme concerned may request the claimant to produce the original documents for checking purpose, if necessary.
如有需要，有關計劃的信託人在處理付款申索時可能會要求申索人提交文件的正本，以核對資料。
- (5) For a claim made by the committee of the estate on behalf of the scheme member, in addition to the required documents in respect of the scheme member, the following documents should be enclosed:
由產業受託監管人代表計劃成員提出的申索，除須提供有關該計劃成員的所需文件外，亦應隨附以下文件：
- (i) a
copy of the evidence of the status of the committee of the estate, i.e. the court order;
產業受託監管人身份的證明文件副本，即法庭命令的副本；
- (ii) a
copy of each claimant's HKID card for verification of the name and identity card number of the claimant if the claimant does not wish to present the card in person for verification ^{Note 6}; and
每名申索人的香港身份證副本，以供核對其姓名及身份證號碼（如不擬親身出示申索人的香港身份證供核對有關資料）^{註6}；及
- (iii) the
original statutory declaration form made by the committee of the estate for a claim for payment of benefits (MPF(S) – W(SD4)) ^{Note 7} (if applicable). Where such a statutory declaration has been made and enclosed with the claim, the statutory declaration form (MPF(S) – W(SD2) and MPF(S) – W(SD3)) for claims made on the grounds of permanent departure from Hong Kong and small balance respectively shall not be required.
產業受託監管人就申索權益所作的法定聲明表格（第 MPF(S) – W(SD4)號表格）^{註7} 正本（如適用）。如使用該表格作出聲明並把該表格附上於本申索，便無須提交基於永久性地離開香港及小額結餘的理由作出申索的法定聲明表格（即第 MPF(S) – W(SD2)號表格及第 MPF(S) – W(SD3)號表格）。
- (6) For a claimant / scheme member who does NOT possess a HKID card, a copy of the passport (only pages with personal particulars and passport number) should be provided to the trustee concerned for verification of the name and passport number of the claimant / scheme member if the claimant / scheme member does not wish to present the passport in person for verification.
如申索人／計劃成員沒有香港身份證，而又不擬親身出示護照以供核對資料，則須提供護照副本（只須提供載有個人資料及護照號碼之頁）以供信託人核對申索人／計劃成員的姓名及護照號碼。
- (7) The statutory declaration must be a valid statutory declaration in the place where the declaration is made (e.g. in Hong Kong, the statutory declaration should be made before and signed by a Commissioner for Oaths (e.g. at a Public Enquiry Service Centre of the Home Affairs Department) or a Notary Public or a Justice of the Peace). A statutory declaration made in a place other than Hong Kong is also acceptable provided that it is made before and signed by a Notary Public or a person authorized under the law of that place to administer an oath or take a statutory declaration.
法定聲明必須是一份屬該聲明宣誓所在地有效的法定聲明（例如在香港，法定聲明須在監誓員（例如在民政事務總署諮詢服務中心）或公證人或太平紳士面前作出，並由他們簽署）。在香港以外地方所作的法定聲明，只要是在公證人或獲該地方法律授權監誓或監理法定聲明的人士面前作出，並由他們簽署，亦可予接受。
- (8) A medical certificate certifying total incapacity (Form MPF(S) – W(M)) or terminal illness (Form MPF(S) – W(T)) shall be signed by a medical practitioner who must be *either* -
證明計劃成員完全喪失行為能力的醫學證明書（第 MPF(S) – W(M)號表格）或罹患末期疾病的醫學證明書（第 MPF(S) – W(T)號表格）須由下述醫生簽署：
- (i) a registered medical practitioner who is registered under the Medical Registration Ordinance (Cap 161), i.e.,
根據《醫生註冊條例》（第 161 章）註冊的註冊醫生，即：
- (a) a person who is duly registered as a medical practitioner with the Medical Council of Hong Kong; or
在香港醫務委員會正式註冊為醫生的人；或
- (b) a person who is deemed to be registered as a medical practitioner under the Medical Registration Ordinance (Cap 161) (i.e. persons who are exempted from registration);
獲視作為根據《醫生註冊條例》（第 161 章）註冊成為醫生的人（即獲豁免無須註冊的人）；

Or 或

- (ii) a registered Chinese medicine practitioner, within the meaning assigned to it by section 2(1) of the Chinese Medicine Ordinance (Cap 549).
《中醫藥條例》(第 549 章)第 2(1)條所界定的註冊中醫。

- (9) For a claim made on the grounds of total incapacity, the claimant shall ask a medical practitioner to fill in the Form MPF(S) – W(M) and attach it to the Form MPF(S) – W(O).

For a claimant who also claims long service payment on the grounds of permanent unfitness for his present job under the Employment Ordinance (Cap. 57), the claimant may use the form “Certificate of an employee’s permanent unfitness for a particular type of work” under that Ordinance to substitute for the Form MPF(S) – W(M) for the purpose of claiming payment of MPF benefits on the grounds of total incapacity.

基於完全喪失行為能力的理由而提出的權益申索，申索人須請醫生填寫 MPF(S)-W(M)表格並附上於第 MPF(S)-W(O)號表格。

申索人如按《僱傭條例》(第 57 章)的規定，以永久不適合擔任其現時工作為理由同時申索長期服務金，則可採用按該條例填寫的「證明僱員永久不適合擔任某類工作的證明書」，替代填寫第 MPF(S)-W(M)號表格，以提出基於完全喪失行為能力的理由而支付強積金權益的申索。

- (10) For a claim made by a scheme member for payment of benefits from a contribution account on the grounds of terminal illness, the scheme member may continue his current employment or current self-employment after he has received the payment of benefits. In that case, future contributions made by the employer (both employer and employee portions) or by the self-employed person himself will continue to be made to the contribution account. If the scheme member wishes to withdraw the benefits derived from future contributions and transfer-in benefits (if any) in the contribution account again, he should lodge another claim for payment of benefits.

計劃成員如基於罹患末期疾病的理由而要求從供款帳戶提取權益，該計劃成員在獲得支付權益後，可繼續從事其現時的受僱或自僱工作。在此情況下，僱主日後作出的供款（包括僱主及僱員部份）或該自僱人士日後作出的供款，將繼續分配至該供款帳戶。計劃成員如欲再度從該供款帳戶提取由未來供款及轉入的權益（如有）所產生的權益，須另行提出權益的申索。