

請將本表格連同「申請文件清單」上所需文件一併遞交。
Please return this form with the required document(s) specified on the
“Checklist of Application Documents”.

文件編號
Form Code
ER



永明彩虹強積金計劃 - 僱主申請表格 SUN LIFE RAINBOW MPF SCHEME – EMPLOYER APPLICATION FORM

重要事項 Important Notes:

- 本表格應該與永明彩虹強積金計劃（「本計劃」）最新版本的《主要計劃資料文件》及《強積金計劃說明書》共同構成本計劃的銷售文件。This form should be read in conjunction with the latest version of the Key Scheme Information Document (“KSID”) and MPF Scheme Brochure of Sun Life Rainbow MPF Scheme (the “Scheme”). KSID and MPF Scheme Brochure, together, constitute the offering document of the Scheme.
- 下述僱主已就參加本計劃而簽署「參與協議」。本表格將構成參與協議的一部分。This form constitutes part of the “Participation Agreement” executed by the Participating Employer named below for the purpose of joining the Scheme.
- 除非下文另有註明，否則有關的「參與協議」和構成本計劃的信託契據（“信託契據”）中的所有條款均適用。如對本表格、銷售文件、「參與協議」或信託契據的內容有疑問，應該諮詢律師、會計師或其他財務顧問。Unless otherwise stated below, all the terms in the relevant “Participation Agreement” and the Trust Deed constituting the Scheme shall be applied. If you are in doubt about the contents of this form, the offering document, the “Participation Agreement” or the Trust Deed, you should consult your solicitor, accountant or other financial advisors.
- 請用正楷填寫本表格，並在適當空格內加上(✓)號。Complete this form in BLOCK LETTERS and tick the appropriate boxes.
- 如須作出任何刪改，請於刪改之位置旁簽署，而該簽署必須與第九部份之成員簽署相同。Please countersign next to any corrections you make on this form with the same member signature as shown in Section IX.

第一部分 SECTION I 僱主資料 EMPLOYER'S INFORMATION

參與僱主公司名稱 Company Name of Participating Employer

英文名稱
English Name

中文名稱 (如有)
Chinese Name (if any)

公司或機構註冊成立
所在的司法管轄區
Jurisdiction of Incorporation
or Organization

同一集團已參加本計劃之公司名稱 (如適用，請提供其中一間已參加之公司資料。)

Name of group company/companies already participated in the Scheme (Please provide information of one of participated company(ies), if applicable)

僱主編號
Employer Code

公司名稱
Company Name

行業類型 Industry Type [請在適當方格加上剔號(✓)。Please tick (✓) the appropriate box.]

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> 飲食 Catering | <input type="checkbox"/> 建造 Construction | <input type="checkbox"/> 製造 Manufacturing | <input type="checkbox"/> 金融 / 保險 / 地產 / 商用服務 Finance / Insurance / Real Estate / Business Services |
| <input type="checkbox"/> 社區 / 社會 / 個人服務 Community / Social / Personal Services | <input type="checkbox"/> 批發 / 零售 / 進出口貿易 Wholesale / Retail / Import and Export Trades | <input type="checkbox"/> 保安 Security Guard | <input type="checkbox"/> 理髮及美容 Hairdressing and Beauty |
| <input type="checkbox"/> 運輸 Transport | <input type="checkbox"/> 清潔 Cleaning | | |
| <input type="checkbox"/> 其他 Others (請註明 Please specify) | | | |

參與本計劃的僱員數目

No. of employees joining the Scheme

註冊證明類別 Registration Type [請在適當方格加上剔號(✓)。Please tick (✓) the appropriate box.]

- | | | |
|---|--|--|
| <input type="checkbox"/> 商業登記 Business Registration | <input type="checkbox"/> 香港警務處社團事務處(社團) Society Office of HK Police (Societies) | <input type="checkbox"/> 教育局 Education Bureau |
| <input type="checkbox"/> 稅務局(慈善機構) Inland Revenue Department (Charitable Organizations) | <input type="checkbox"/> 職工會登記局 Registry of Trade Unions | <input type="checkbox"/> 其他 Others |

登記證號碼

Certificate Number

分店號碼

Branch Code

(如屬商業登記，請提供商業登記號碼及分店號碼。For business registration, please provide business registration number and branch code.)

公司註冊證編號 Certificate of Incorporation Number :

(只適用於有限公司 Applicable to limited company only.)

註冊地址 Registered Address (不接受郵政信箱 P.O. Box will NOT be accepted)

只需提供中文或英文地址 Please provide either Chinese OR English address below:

室 Flat / Room 樓 Floor 座 Block

大廈 / 屋邨
Building / Estate

門牌號碼及街道名稱
Number and Name of Street

地區 / 城市
District Area / City

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> 香港 Hong Kong | <input type="checkbox"/> 九龍 Kowloon | <input type="checkbox"/> 新界 New Territories | <input type="checkbox"/> 離島 Outlying Islands |
| <input type="checkbox"/> 中國 (深圳) China (Shenzhen) | <input type="checkbox"/> 中國 (其他) China (others) | <input type="checkbox"/> 國家 Country | |



通訊地址 Correspondence Address

(如沒有提供或失效，我們會以註冊地址通訊。 If this is not provided or becomes invalid, the registered address will be defaulted.)

只需提供中文或英文地址 Please provide either Chinese OR English address below:

| | | | | | |
|--|--|---|---|------------|----------------------|
| 室 Flat / Room | <input type="text"/> | 樓 Floor | <input type="text"/> | 座 Block | <input type="text"/> |
| 大廈 / 屋邨 Building / Estate | <input type="text"/> | | | | |
| 地區 / 城市 District Area / City | <input type="text"/> | | | | |
| <input type="checkbox"/> 香港 Hong Kong | <input type="checkbox"/> 九龍 Kowloon | <input type="checkbox"/> 新界 New Territories | <input type="checkbox"/> 離島 Outlying Islands | | |
| <input type="checkbox"/> 中國 (深圳) China (Shenzhen) | <input type="checkbox"/> 中國 (其他) China (others) | <input type="checkbox"/> 國家 Country <input type="text"/> | | | |

主要聯絡人 ^{Note 1,2,3} Primary Contact Person ^{Note 1,2,3}

| | | | | | |
|-----------------------|--|-----------------------|------------------------------------|-----------------|---------------------------------------|
| 稱謂 Title | <input type="checkbox"/> 先生 Mr | 英文姓名 English Name | <input type="text"/> | 職銜 Job Title | <input type="text"/> |
| | <input type="checkbox"/> 女士 Ms | | (姓 Surname) <input type="text"/> | | (名 Given Name) <input type="text"/> |
| 電話號碼 Telephone No. | (<input type="text"/>) | 電郵地址 Email Address | <input type="text"/> | | |
| | 國家號碼 Country Code <input type="text"/> | | | | |

*** 必須提供電郵地址 (不接受共用電郵地址)。否則，將不能提供網上退休金服務中心及互動語音系統服務。***
 *** Email address (shared email address is not accepted) must be provided. Otherwise, Online Pension Services Centre and Interactive Voice Responsive System will not be provided. ***

第二聯絡人 (如有) Secondary Contact Person (If Any)

| | | | | | |
|-----------------------|--|-----------------------|------------------------------------|-----------------|---------------------------------------|
| 稱謂 Title | <input type="checkbox"/> 先生 Mr | 英文姓名 English Name | <input type="text"/> | 職銜 Job Title | <input type="text"/> |
| | <input type="checkbox"/> 女士 Ms | | (姓 Surname) <input type="text"/> | | (名 Given Name) <input type="text"/> |
| 電話號碼 Telephone No. | (<input type="text"/>) | 電郵地址 Email Address | <input type="text"/> | | |
| | 國家號碼 Country Code <input type="text"/> | | | | |

*** 必須提供電郵地址 (不接受共用電郵地址)。否則，將不能提供網上退休金服務中心及互動語音系統服務。***
 *** Email address (shared email address is not accepted) must be provided. Otherwise, Online Pension Services Centre and Interactive Voice Responsive System will not be provided. ***

備註 Notes:

1. 必須提供主要聯絡人。 Primary Contact Person must be provided.
2. 主要聯絡人為所有強積金行政職責的聯絡人。如未能成功聯絡主要聯絡人，我們會聯絡第二聯絡人處理有關強積金事宜。 Primary Contact Person is the contact of all MPF administration functions. We will contact the Secondary Contact Person if we do not contact the Primary Contact Person successfully.
3. 如有多於一個隸屬中心、第二聯絡人及 / 或以行政職責區分聯絡，請填妥及遞交「隸屬中心及聯絡人申請 / 更改表格」。 If there are more than 1 reporting centre, secondary contact and/or contact persons are categorised by functions, please complete and submit "Reporting Centre/Contact Person Application/Change Form".

語言選擇 Language Selection (用作將來聯絡通訊 For future communication)

中文 Chinese 英文 English 如沒有在提供之語言選項中作出選擇，語言選擇將被設定為「中文」。
 Your language selection will be defaulted as "Chinese" if neither one of the provided options is chosen.

第二部分 SECTION II 稅務居民身份自我證明 (必須填寫) SELF-CERTIFICATION OF TAX RESIDENCY (Must Fill)**重要提示 Important Notes:**

- 這是你向永明信託有限公司(「受託人」)提供的自我證明，作為自動交換財務帳戶資料用途以遵守稅務法律及規例(包括但不限於已包含經濟合作與發展組織(OECD)《共同匯報標準》(CRS)為自動交換資料列明之規定的《稅務條例》(第 112 章))。受託人可把收集所得的資料呈交稅務局，稅務局會將資料交到帳戶持有人作為稅務居民所屬的另一申報稅務司法管轄區的主管部門。 This is a Self-Certification provided by you to Sun Life Trustee Company Limited (the "Trustee") for the purpose of Automatic Exchange of Financial Account Information ("AEOI") in compliance with tax law and regulations (including but not limited to the Inland Revenue Ordinance (Cap.112) which incorporate the requirements set out in the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard (CRS) for AEOI). The data collected may be submitted by the Trustee to the Inland Revenue Department for which may further exchange such information to the competent authority of another reportable jurisdiction in which the account holder may be resident for tax purposes.
- 於本表格及其他相關文件所提供的僱主資料，包括姓名、商業登記號碼、公司或機構註冊成立所在的司法管轄區、註冊地址及通訊地址等，將會成為此自我證明的一部分。 The Employer's information, including name, business registration no., jurisdiction of incorporation or organization, registered address and correspondence address, etc., provided in this form and other related documents will form part of this self-certification.
- 此自我證明是有效文件除非實體/個人(如僱主屬獨資經營者)的稅務居民身份相關的情況有所改變。如情況有所改變，以致影響本聲明所述的實體/個人(如僱主屬獨資經營者)的稅務居民身分，或引致本表格任何部份所載的資料不正確，你必須在情況有所改變後的 30 天內通知受託人有關的改變並提供適當地更新的自我證明。 This Self-Certification will remain valid unless there is any change in circumstances relating to the status of tax residency(ies) of the Entity /individual (if Employer is a sole-proprietorship). You must notify the Trustee within 30 days if there is any change in circumstances that makes any of the information provided in any parts of this self-certification form incorrect or incomplete and provide a suitably updated self-certification form.
- 受託人有權要求你提供所有相關的身份證明 / 驗證文件。如未能提供所需資料及其他個人資料，可能導致你的申請 / 指示不獲處理。 All relevant identification/ verification documentation will be provided to the Trustee upon request. Failure to provide us with the information and other personal data as requested may result in your application/ instruction not being able to be processed.
- 作為財務機構，受託人不獲允許提供稅務或法律意見。若你對你的稅務居民身份存有任何疑問，請諮詢專業稅務顧問或瀏覽 OECD (<http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/>)及稅務局(http://www.ird.gov.hk/eng/tax/dta_aeoi.htm)有關自動交換財務帳戶資料的網頁，以獲取更多 CRS 及相關資料。 As a financial institution, the Trustee is not allowed to give tax or legal advice. If you have any questions regarding your tax residency, please consult your tax adviser or visit the OECD and Inland Revenue Department's AEOI website at <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/> and http://www.ird.gov.hk/eng/tax/dta_aeoi.htm respectively for more CRS and related information.

此部分所指之「實體」為法團或合夥(獨資經營者除外)。如果你是獨資經營者,只需填寫本部分第(1)、(2)及(5)項。
The Entity mentioned in this section refers corporations and partnerships (excluding sole proprietors). If you are a sole proprietor, please complete items (1), (2) and (5) only in this section.

(1) 實體/獨資經營者之稅務居住地為(請選一項) Entity/Sole Proprietor Tax Residence is (Please tick one)

- (i) 只有香港及沒有處於任何其他司法管轄區或國家的稅務居住地(其稅務編號為註在下面◆欄)
 Hong Kong **ONLY with no tax residence in any other jurisdictions or countries** (the respective Taxpayer Identification Number (TIN) is as noted in◆below)
(如你已隨本申請表格遞交商業登記證副本,你可略過第(2)項。If you have submitted the Business Registration Certificate ("BR") copy with this application, you may skip item (2).)
- (ii) 是香港(及其稅務編號為註在下面◆欄)及其他司法管轄區或國家
 Hong Kong (and the respective Taxpayer Identification Number (TIN) is as noted in◆below) and also some other jurisdictions or countries
(如你已隨本申請表格遞交商業登記證副本,請為你於香港以外作為稅務居民的所有司法管轄區或國家填寫第(2)項之列表。)(If you have submitted the BR copy with this application, please fill out the table of item (2) for all the jurisdictions or countries in which you are a resident for tax purpose, other than HK.)
- (iii) 不是香港而是其他司法管轄區或國家
 NOT Hong Kong, but instead some other jurisdictions or countries
(Please fill out the table of item (2).請填寫第(2)項之列表。)
- ◆ 稅務編號 Taxpayer Identification Number (TIN):
 實體 Entity: 香港商業登記號碼 Hong Kong Business Registration Number
 獨資經營者 Sole Proprietor: 香港身份證號碼 HKID Card No.

(2) 如果在上面的第(ii)或(iii)項中加上剔號(✓),請列明實體在當地為符合稅務目的之居民的所有國家/司法管轄區(如你已隨本申請表格遞交商業登記證副本,香港以外)以及該國家/司法管轄區發出的稅務編號或具有等同功能的識辨編號(TIN)。如下列位置不敷應用,請按以下格式另加新頁。請參考 OECD 網站的稅務居民: <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency>。If a tick (✓) is input in the box (ii) or (iii) above, please list all countries / jurisdictions (other than Hong Kong if you have submitted the BR copy with this application) where the Entity is a resident for tax purposes and Taxpayer Identification Number or its Functional Equivalent (TIN) for each country / jurisdiction. If the space provided is insufficient, please provide it in the below format on additional sheet(s). Please refer to OECD website at: <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> for tax residency related information.

| 稅務居民所在國家 / 司法管轄區 Country / Jurisdiction of Tax Residence | 稅務編號 TIN | 若未能提供稅務編號,請於下方填上理由 A、B 或 C If no TIN is available, please indicate Reason A, B or C below | 若你選擇理由 B,請在下方解釋無法取得稅務編號的原因 Please explain why you are unable to obtain a TIN if you selected Reason B |
|---|-------------|--|--|
| 1 | | | |
| 2 | | | |
| 3 | | | |

理由 A - 實體在當地為稅務居民的國家 / 司法管轄區沒有向其居民發出稅務編號。

Reason A: The country / jurisdiction where the Entity is a resident for tax purposes does not issue TINs to its residents..

理由 B - 實體無法獲得稅務編號。(若你選擇這理由,請在上表相應的欄列內解釋你無法獲得稅務編號的原因。)

Reason B: The Entity is unable to obtain a TIN. (Please explain why you are unable to obtain TIN in the corresponding column in the above table if you have selected this reason.)

理由 C - 無需稅務編號。(註:只有在相關司法管轄區的主管當局不需要披露該國家 / 司法管轄區發出的稅務編號方可選擇這理由。)

Reason C: No TIN is required. (Note: Only select this reason if the authority of the relevant country / jurisdiction of residence does not require the TIN to be disclosed.)

如僱主屬獨資經營者,請略過第(3)、(4)項並填寫第(5)項。If Employer is a sole-proprietorship, please skip items (3), (4) and complete item (5).

(3) 實體類別(不適用於獨資經營者) Entity Type (Not applicable to sole-proprietorship)

在其中一個適當的空格內加上剔號(✓),並提供有關資料。Please tick (✓) one of the appropriate boxes and provide the relevant information.

- 財務機構
Financial Institution
- 託管機構、存款機構或指明保險公司
Custodial Institution, Depository Institution or Specified Insurance Company
- 投資實體,但不包括由另一財務機構管理(例如:擁有酌情權管理投資實體的資產)並位於非參與稅務管轄區的投資實體
Investment Entity, except an investment entity that is managed by another financial institution (e.g. with discretion to manage the entity's assets) and located in a non-participating jurisdiction

主動非財務實體
Active Non-Financial Entity
("NFE")

- 符合相關收入及資產規定的主動非財務實體
Active NFE by reason of income and assets
- 該非財務實體的股票經常在 _____ (一個具規模證券市場) 進行買賣
NFE the stock of which is regularly traded on _____, which is an established securities market
- 為 _____ 的有關連實體。該有關連實體的股票經常在 _____ (一個具規模證券市場) 進行買賣
Related entity of _____, the stock of which is regularly traded on _____, which is an established securities market
- 政府實體、國際組織、中央銀行或由前述的實體全權擁有的其他實體
NFE is a governmental entity, an international organization, a central bank, or an entity wholly owned by one or more of the foregoing entities
- 除上述以外的主動非財務實體(請說明 _____)
Active NFE other than the above (Please specify _____)

被動非財務實體
Passive Non-Financial Entity
("NFE")

- 位於非參與稅務管轄區並由另一財務機構管理的投資實體
Investment entity that is managed by another financial institution and located in a non-participating jurisdiction
- 不屬主動非財務實體的非財務實體
NFE that is not an active NFE

每位被動非財務實體的控權人需提供其稅務居民身份自我證明。請填寫第(4)項。

For Passive NFE, Tax Residency Self-Certification for each Controlling Person is required. Please complete item (4).

- (4) 控權人(如實體帳戶持有人是被動非財務實體，填寫此部) Controlling Person (Complete this part if the entity account holder is a passive NFE) 請填寫實體之所有控權人的姓名在列表內。就法人實體，如沒有自然人行使控制權，控權人將會是該法人實體的高級管理人員。Indicate the name of all controlling person(s) of the entity in the table below. If no natural person exercises control over an entity which is a legal person, the controlling person will be the individual holding the position of senior managing official.

每名控權人須分別填寫一份自我證明表格(控權人)。Complete Self-Certification Form – Controlling Person for each controlling person.

| | | | |
|-----|--|-----|--|
| (1) | | (4) | |
| (2) | | (5) | |
| (3) | | (6) | |

- (5) 獨資經營者之資料(只適用於獨資經營者) Sole-proprietor Information (For Sole Proprietorship Only)

| | | | |
|--|--|--|--|
| 名稱 Name | 英文姓氏 Surname in English | 英文名字 Given Name in English | |
| | 中文姓氏 Surname in Chinese | 中文名字 Given Name in Chinese | |
| 香港身份證號碼 / 護照號碼 [^] HKID Card No. / Passport No [^] . | 出生日期 Date of Birth | | |
| ([^] 不適用於香港永久性居民 NOT applicable to Hong Kong permanent resident) | 日 dd / 月 mm / 年 yyyy | | |
| 現時住址 Current Residential Address | 室 Room / Flat | 樓 Floor | 座 Block |
| | 大廈 / 屋村名稱 Name of Building / Estate | 街道名稱及號碼 Street No. & Name | |
| 地區 District | <input type="checkbox"/> 香港 Hong Kong | <input type="checkbox"/> 九龍 Kowloon | <input type="checkbox"/> 新界 New Territories |
| 城市 City * | 郵寄代碼 Postal Code * | 國家 Country * | |
| *海外地址必須填寫 Mandatory for overseas address | | | |

第三部分 SECTION III 發放薪金形式^{Note 4} PAYROLL FREQUENCY^{Note 4}

計劃生效日期 / / 日/月/年
Scheme Effective Date DD/MM/YYYY

請選擇一項及在適當的方格加上剔號 (✓)。 Please select one option and tick (✓) the appropriate box.

發放薪金形式
Payroll Frequency 每年 Yearly 每季 Quarterly 每月^{Note 5} Monthly 每半個月 Semi-Monthly 每星期 Weekly 其他 Others

薪金週期
Payroll Period From / / 日/月 DD/MM To / / 日/月 DD/MM

備註 Note:

- 如貴公司提供多於一個發放薪金形式給成員，請填寫「隸屬中心及聯絡人申請 / 更改表格」。 If you have more than one type of payroll frequency, please complete the "Reporting Centre/Contact Person Application/Change Form".
- 如發放薪金形式選擇每月而沒有提供薪金週期，薪金週期將被設定為每月的第一日至最後一日。 If you have selected Monthly payroll frequency but Payroll Period is not provided, the Payroll Period will be defaulted as from the first calendar day to the last calendar day.

第四部分 SECTION IV 供款方法 CONTRIBUTION METHOD

付款結算書安排 Remittance Statement Arrangement

為提供優質的客戶服務及愛護環境，我們在網上退休金服務中心內設有「網上付款結算書」以遞交供款資料。透過此項服務，貴公司可以不受時間及地點限制遞交供款資料，方便快捷。 To provide excellent client experience and be environmental friendly, "Online Remittance Statement" is available in our Online Pension Services Centre for contribution information submission. Through this service, you can submit contribution information quickly and conveniently without limitation of time and location.

供款付款方式 Contribution Payment Method

直接付款 Direct Debit

如以直接付款授權方式繳交供款，請完成並遞交「直接付款授權」。 If contribution payments will be settled by direct debit, please complete and submit "Direct Debit Authorisation Form".

支票付款 Payment by cheque

如以支票方式繳交供款，請準備支票抬頭為「永明信託有限公司 - 強積金」劃線支票。 If contribution payments will be settled by cheque, please prepare a crossed cheque payable to "Sun Life Trustee Company Limited - MPF".

直接存款 Direct Credit

如以直接存款方式繳交供款，請每次繳交供款時另行填寫強積金供款直接存款通知書及提供存款收據或網上交易紀錄的截圖等證明文件。

If contribution payments will be settled by direct credit, please complete the MPF Contribution Direct Credit Notification and attach supporting documents such as deposit slip or online transaction confirmation print screen when submit contribution payment every time.

第五部分 SECTION V 自願性供款指示 INSTRUCTION FOR VOLUNTARY CONTRIBUTION

貴公司是否為僱員提供自願性供款？

Does you want to make additional voluntary contribution for your members?

- 是 (請另行填寫「僱主自願性供款申請表格」) 否
Yes (Please complete the "Employer Voluntary Contribution Application Form") No

第六部分 SECTION VI 電子提示服務 E-ALERT SERVICES

如欲登記以下服務，請在適當空格內加 (✓) 號，並請閱讀以下相關條款。 Please tick the appropriate box if you want to enroll the below service and please read the relevant terms below.



為響應環保及減少使用紙張，我們將以電郵通知貴公司登入網上退休金服務中心查閱一般報表及文件，例如：「付款結算書」通知、確認收據等。此外，我們亦會以電郵通知提醒重要事項，如供款提示。

To protect the environment and reduce using paper, you will receive an email reminder whenever your general statement and documents is/are ready for perusal at the Online Pension Services Centre. e.g. "Online Remittance Statement" acknowledgement, "Receipt Acknowledgement" etc. In addition, we will also send you email for important events, e.g. contribution reminder.



以電子通訊收取受監管的通知 E-Notification for Regulatory Documents

在「以電子通訊收取受監管的通知」旁邊的方格內加上剔號，即代表閣下同意永明信託有限公司(「受託人」)以電子方式取代郵寄提供予閣下(即於本永明彩虹強積金計劃表格上指定之參與僱主)紙本的受監管通知(包括但不限於參與僱主通知書、基金便覽、主要計劃資料文件、強積金計劃說明書及其補充資料及受託人不時定義的其他文件)，受託人不時定義的特別情況除外。根據此電子形式安排，適用的受監管通知會依據適用的時序被上載到網上退休金服務中心，我們將以電郵通知閣下在網上退休金服務中心查閱相關的受監管文件。如閣下欲更改電郵地址或取消此項服務，請至少在 14 天前透過本公司之網上退休金服務中心或聯絡客戶服務熱線遞交通知，或填妥及寄回更改表格給本公司辦理。 By checking the box for "E-Notification for Regulatory Documents" above, you consent to the use of electronic means by Sun Life Trustee Company Limited ("the Trustee") for giving you (being the named Participating Employer of the Sun Life Rainbow MPF Scheme on this form) a number of regulatory documents (including but not limited to Notice of Participating Employers, fund fact sheets, KSID, MPF Scheme Brochures and addendum of the MPF Scheme Brochure or such documents as may be defined by the Trustee from time to time) in place of physical delivery of hard copies, save for exceptional circumstances as may be defined by the Trustee from time to time. Under this electronic arrangement, the applicable regulated documents will be uploaded to the Online Pension Services Center under the applicable timeline and you will receive an email whenever a specific document is ready for viewing at the Online Pension Services Center. For any change in email address or cancellation of this service, please inform us at least 14 days in advance by submitting your request through our Online Pension Services Centre or contact our Sun Life Pension Services Hotline, or complete and return the Information Change Form.

第七部分 SECTION VII**網上退休金服務中心及互動語音系統服務 ONLINE PENSION SERVICES CENTRE AND INTERACTIVE VOICE RESPONSIVE SYSTEM ("IVRS")**

第一部分提供的主要聯絡人會成為網上退休金服務中心及互動語音系統服務的授權人並擁有所有隸屬中心的權限。有關文件將根據上述提供資料發送至主要聯絡人。如欲將網上退休金服務中心的登入權限授予第一部分的第二聯絡人，請在下面的方格加上剔號 (✓)。相同於主要聯絡人的權限將授權於第二聯絡人。

如要為主要聯絡人及第二聯絡人設定不同權限，請遞交「隸屬中心及聯絡人申請 / 更改表格」。

Primary Contact Person provided in Section I will be the delegate of Online Pension Services Centre with full access right to all reporting centres and IVRS. Related documents will be sent to the Primary Contact Person according to the information provided on the above.

If the access right of Online Pension Services Centre will be granted to the Secondary Contact Person in Section I, please tick (✓) the following box. Same access right as Primary Contact Person will be granted to Secondary Contact Person at Online Pension Services Centre.

If you require different access right for Primary and Secondary Contact Person, please submit "Reporting Centre/Contact Person Application/Change Form".

僱主同意將網上退休金服務中心的登入權限授予第一部分的第二聯絡人。

The Employer agrees to grant the access right of Online Pension Services Centre to the Secondary Contact Person in Section I.

第八部分 SECTION VIII 授權簽署人 AUTHORISED SIGNATORIES**授權人資料 ^{Note 6} Information of Authorised Person(s) ^{Note 6}**

下列任何一個簽署式樣將用於核對日後僱主遞交的文件。以下簽署人獲授權代表僱主進行通訊(包括透過電郵)、給予指示處理強積金有關的一切事宜包括及後的授權人更改 / 增加 / 取消、提供資料及授權權益付款。如以下資料有任何更改，請立即通知行政管理人。

Any of the following signature(s) will be used to verify future correspondence submitted by the employer. The following signatories are authorised to enter into correspondence (including via e-mail), give instructions to manage all MPF related matters including subsequent change/addition/deletion of authorised person(s), provision of information and authorisation of benefit payments on behalf of the Employer. If there are any changes in the following information, please inform the administrator immediately.

請參照附頁的授權簽署人名單 (請將名單附加於此申請表格)

Please refer to the attached authorised signatories list (Please attach your own list to this application)

授權簽署人名單如下

Please see the following authorised signatories list

授權簽署人 1**Authorised Signature 1**

英文姓名 ^{Note 7}

English Name ^{Note 7}

(姓 Surname)

(名 Given Name)

職銜

Job Title

身份證明文件類別

Identity Document Type

香港身份證

HKID

護照

Passport

身份證明文件號碼

Identity Document No. _____

國籍

Nationality _____

(護照僅供沒有香港身份證的申索人填寫 Passport is applicable ONLY for claimant without HKID Card)

住址

Residential Address _____

國家

Country _____

(適用於非香港地址 applicable to non-Hong Kong address)

授權簽署人 1
Authorised Signature 1

授權簽署人 2**Authorised Signature 2**

英文姓名 ^{Note 7}

English Name ^{Note 7}

(姓 Surname)

(名 Given Name)

職銜

Job Title

身份證明文件類別

Identity Document Type

香港身份證

HKID

護照

Passport

身份證明文件號碼

Identity Document No. _____

國籍

Nationality _____

(護照僅供沒有香港身份證的申索人填寫 Passport is applicable ONLY for claimant without HKID Card)

住址

Residential Address _____

國家

Country _____

(適用於非香港地址 applicable to non-Hong Kong address)

授權簽署人 2
Authorised Signature 2

授權簽署人 3**Authorised Signature 3**

英文姓名 ^{Note 7}

English Name ^{Note 7}

(姓 Surname)

(名 Given Name)

職銜

Job Title

身份證明文件類別

Identity Document Type

香港身份證

HKID

護照

Passport

身份證明文件號碼

Identity Document No. _____

國籍

Nationality _____

(護照僅供沒有香港身份證的申索人填寫 Passport is applicable ONLY for claimant without HKID Card)

住址

Residential Address _____

國家

Country _____

(適用於非香港地址 applicable to non-Hong Kong address)

授權簽署人 3
Authorised Signature 3

授權簽署人 4
Authorised Signature 4

英文姓名 ^{Note 7} English Name _____ 職銜 Job Title _____
(姓 Surname) (名 Given Name)

身份證明文件類別 Identity Document Type 香港身份證 HKID 護照 Passport 身份證明文件號碼 Identity Document No. _____ 國籍 Nationality _____

住址 Residential Address _____

國家 Country _____

授權簽署人 4
Authorised Signature 4

(護照僅供沒有香港身份證的申索人填寫 Passport is applicable ONLY for claimant without HKID Card)

備註 Notes:
6. 請附上授權人的香港身份證 / 護照副本。如在遞交申請時未能提供完整資料及 / 或文件，該授權人的委任將會無效。 Please attach a copy of HKID Card/Passport of authorised person(s). Appointment of authorised person will not be processed if complete information and/or document(s) have not been provided.
7. 與身份證明文件相同。 Same as the identity document.

第九部分 SECTION IX 佣金透露聲明及聲明 COMMISSION DISCLOSURE STATEMENT AND DECLARATION

- 僱主 (下稱「本人」) 聲明，本表格內所填報的所有資料和聲明均屬真實、正確和完備。本公司進一步承諾，如果所提供的資料有任何改變，本公司會在合理而切實可行範圍內盡快通知受託人。The Employer ("I") declares that the information given and statements made in this form are, to the best of our knowledge and belief, true, correct and complete. I further undertake that if there is any change in the information so provided, I shall notify the Trustee of such change as soon as reasonably practicable.
- 本人現確認已收到本計劃的銷售文件 (包括主要計劃資料文件及強積金計劃說明書)，並充分瞭解有關本計劃的特點、權益和收費。I confirm that I have received the offering document (comprising KSID and MPF Scheme Brochure) of the Scheme and I thoroughly understand the features, benefits and charges of the Scheme.
- 本人確認已收到、閱讀和明白附件《個人資料收集聲明(2018-03a 版本)》中的條款。I confirm that I have received, read and understood the terms in the enclosed "Personal Information Collection Statement (Version 2018-03a)".
- 本人確認已完全明白參與本計劃的權利和義務，並獲得有關查詢電話號碼，方便日後作出查詢。I confirm that I fully understand our rights and obligations in regard to the Scheme and have received an inquiry telephone number for any future enquires.
- 本人知悉及同意，財務機構可根據《稅務條例》(第 112 章)章有關交換財務帳戶資料的法律條文：(a)收集本表格所載資料並可備存作自動交換財務帳戶資料用途及(b)本把該等資料和關於帳戶持有人及任何須申報帳戶的資料向香港特別行政區政府稅務局申報。從而把資料轉交到帳戶持有人的居留司法管轄區的稅務當局。本人證明，就與本表格所有相關的帳戶，本人獲帳戶持有人授權簽署本表格。I acknowledge and agree that (a) the information contained in this form is collected and may be kept by the Trustee for the purpose of automatic exchange of financial account information, and (b) such information and information regarding the account holder and any reportable account(s) may be reported by the Trustee to the Inland Revenue Department of the Government of the Hong Kong Special Administrative Region and exchanged with the tax authorities of another jurisdiction or jurisdictions in which the account holder may be resident for tax purposes pursuant to the legal provisions for exchange of financial account information provided under the Inland Revenue Ordinance (Cap.112).
- 本人承諾，如情況有所改變，以致影響本表格第二部分所述的實體/個人(如僱主屬獨資經營者)的稅務居民身分，或引致本表格所載的資料不正確，本人會通知受託人，並會在情況發生改變後 30 日內，向受託人提交一份已適當更新的自我證明表格。I undertake to advise the Trustee of any change in circumstances which affects the tax residency status of the entity/individual (if Employer is a sole-proprietorship) identified in Section II of this form or causes the information contained herein to become incorrect, and to provide the Trustee with a suitably updated self-certification form within 30 days of such change in circumstances.
- 本人特此承認，此表格一經填妥並簽署後，表格所載資料和條款將構成「參與協議」的一部分，本人並同意受信託契據的條款、其管規規則以及「參與協議」的約束。Upon completion and signing of this form, I hereby acknowledge that the information and provisions contained in this form shall form part of the "Participation Agreement" and I agree to be bound by the terms of the Trust Deed, the governing rules thereof and the "Participation Agreement".
- 本人已獲僱主正式授權提交本申請表格。除非本人在以下方格加上剔號，否則本人將成為管理強積金帳戶的其中一位獲授權人(如上文第六部份所述)。I have been duly authorised by the Employer to submit this application form. I will be one of the authorised persons to manage the MPF account as stated in Section VI above unless I check the box below.
- 本人確認已識別本表格所填寫的每位授權人(如適用)的身份。本人同時確認已根據由政府機構、有關當局或有關當局認可的任何其他可靠及獨立來源所提供的文件、數據或資料(包括由政府機構發出的香港身份證)核實其身份。I acknowledge that I have identified each authorised signatory stated in this form (if applicable), and further confirms that I have verified his / her identity on the basis of documents, data or information provided by a governmental body (including the Hong Kong Identity Card), a relevant authority or any other reliable and independent source that is recognized by the relevant authority.
- 本人同意將僱主自願性供款(如有)之未歸屬權益，用作抵銷僱主日後之供款。I agree that the foregone benefits arising from the Employer's voluntary contribution (if any) will be used to offset against the Employer's future contribution to the Scheme.
- 本人明白、確知及同意，香港永明金融有限公司(「永明金融」)會就本人參與本計劃期間所收的(i)定期及/或一次性或任何其後之增加)供款；及/或(ii)轉入的累算權益；及/或(iii)計劃內所管理的資產(如適用)，向負責安排的獲授權保險經紀/代理支付佣金、費用或其他獎賞。假如申請人為法人團體，代表申請人簽署的獲授權人員則向永明金融及永明信託有限公司確認他/她已獲法人團體授權簽署。I understand, acknowledge and agree that, as a result of my participation in the Scheme, Sun Life Hong Kong Limited ("SLHK") will pay the MPF intermediary a commission, fee or other rewards in respect of (i) contribution (including regular and/or lump sum or any increase thereof); (ii) accrued benefits transfer-in received by the Scheme; and/or (iii) asset managed under the Scheme (if applicable), during the course of the said participation. Where the applicant is a body corporate, the authorised person who signs on behalf of the applicant further confirms to SLHK and Sun Life Trustee Company Limited that he or she is authorised to do so.

如本部分的簽署人沒有在以下方格加上剔號，則視為同意成為此強積金帳戶的授權人。簽署人須連同香港身份證 / 護照副本一併遞交。
If the signatory in this section does not tick the following box, he/she is deemed as agree to be an authorised person of this MPF account. The signatory should submit a copy of HKID/Passport.

本人聲明本人不是此強積金帳戶的授權人。 I declare that I am NOT the authorised person of this MPF account.

英文姓名 ^{Note 7} English Name _____ 職銜 Job Title _____
(姓 Surname) (名 Given Name)

身份證明文件類別 Identity Document Type 香港身份證 HKID 護照 Passport 身份證明文件號碼 Identity Document No. _____ 國籍 Nationality _____

住址 Residential Address _____

國家 Country _____

由僱主正式授權
簽署人 ^{Note 9} 簽署(請附加公司蓋章)
Signed by the Employer by its duly authorised signatory(ies)
(Please affix company chop) :

日期 Date _____ 日/月/年 DD/MM/YYYY

請勿簽署未填妥的表格
Don't sign on incomplete form

備註 Notes:
8. 與身份證明文件相同。 Same as the identity document.
9. 如簽署人並非該公司的董事，請就簽署人代表該公司行事提供授權書或董事會會議記錄或獨立部門發出的證明。 If the signer is not the director of the company, please provide authorisation letter or board resolution or certification by independent department for the person acting on behalf of the company.

申請文件清單 Checklist of Application Documents

如未能提供全部所需文件，可能會影響開立此強積金帳戶。 MPF account setup may be affected if you do not submit all required documents.

1. 已簽署之「僱主申請表格」 Signed "Employer Application Form"
2. 已簽署之「參與協議」 Signed "Participation Agreement"
3. 授權簽署人名單正本 (如適用) Original Authorised Signatory List with Specimen Signature(s) (if applicable)
4. 授權人香港身份證 / 護照副本 Copy of HKID Card/Passport of Authorised Person(s)
5. 法人團體所有董事名單 (如適用) List of All Directors of the Corporation (if applicable)
6. 合夥的所有合夥人的姓名名單或非法人團體所有成員的姓名名單，以及合夥或非法人團體的實益擁有人及擔任職位的人的姓名名單 (如適用)
List of All Partners of the Partnership or All Members of the Unincorporated Body and the Beneficial Owners or Office Bearers of the Partnership of the Unincorporated Body (if applicable)
7. 就簽署人代表該公司行事提供授權書或董事會會議記錄 (如適用) Authorisation Letter or Board Resolution (if applicable)
8. 公司註冊證副本 (如適用) Copy of Certificate of Incorporation (if applicable)
9. 商業登記證副本 (如適用) Copy of Business Registration Certificate (if applicable)
10. 章程大綱及細則 (如適用) Memorandum and Articles of Association (if applicable)
11. 擁有權架構表 (如適用) Ownership Chart (if applicable)
12. 自我證明表格 – 控權人 (如適用) Self-Certification Form – Controlling Person (if applicable)

| | |
|--|--|
| 請將填妥表格交予： 永明彩虹強積金計劃行政管理人 — 卓譽金融服務有限公司 香港九龍紅磡德豐街 18 號海濱廣場一座 10 樓 | Please send the completed form to : Sun Life Rainbow MPF Scheme, The Administrator, BestServe Financial Limited 10/F, One Harbourfront, 18 Tak Fung Street, Hungghom, Kowloon, Hong Kong |
| 電話：3183 1888 傳真：3183 1889 網址：www.sunlife.com.hk | Tel: 3183 1888 Fax: 3183 1889 Website: www.sunlife.com.hk |

只供本公司使用 FOR OFFICE USE ONLY - 強積金中介人資料 MPF Intermediary Details

只供理財顧問 For Agent

理財顧問一 Agent 1

理財顧問二 Agent 2

| | | |
|--|---|---|
| 姓名 Name | | |
| 編號 Code | | |
| 強積金註冊編號 MPF Card Registration No. | | |
| 佣金分配百分比 (只限整數) Commission Split Percentage (Accept integer only) | % | % |
| 佣金編號 Commission Code | | |

只供經紀/保險代理公司 For Broker/Company Agent

經紀/保險代表公司名稱
Broker/Company Agent Name _____

經紀/保險代表公司編號
Broker/Company Agent Code _____

經紀/保險代表公司強積金註冊編號
Broker Company Agent MPF Card Registration No. _____

佣金編號
Commission Code _____

顧問姓名
Name of Consultant _____

顧問電郵地址
Email Address of Consultant _____

顧問聯絡電話號碼
Contact No. of Consultant _____

顧問強積金註冊編號
Consultant MPF Card Registration No. _____

來源 Source 直接 Direct 共享 Shared 轉介 Referral

類別 Category A B

現有永明彩虹公積金計劃客戶?
Existing Sun Life Rainbow ORSO Scheme Client? 是 Yes 否 No

現有永明彩虹強積金計劃客戶?
Existing Sun Life Rainbow MPF Scheme Client? 是 Yes 否 No

保單編號 Policy No. _____

僱主編號 ER Code _____

個人資料收集聲明 PERSONAL INFORMATION COLLECTION STATEMENT

申請人 / 成員明白及同意永明信託有限公司(「受託人」) 可以將其所收集的任何個人資料(不論由此申請表所收集或由其他途徑取得) 作以下用途: (i) 處理成員的此項申請及任何其他申請; (ii) 為申請人 / 成員參與本計劃; (iii) 管理成員於本計劃的供款和累算權益的事宜; (iv) 進行客戶調查; (v) 為客戶研究及設計金融、保險或退休金產品; (vi) 為申請人 / 成員甄選及參與獎賞、忠實或特選客戶計劃; (vii) 因上述目的與成員聯絡; (viii) 與上述目的直接有關的任何其他目的; 及 (xi) 為遵守適用的法例、法規或法庭命令。

受託人可為以上目的披露申請人 / 成員的個人資料予(a) 為協助受託人就上述用途(不論在香港或其他地方) 而提供服務的第三方, 包括計劃管理人(條件是有關承辦商須把所有個人資料保密並只會為提供有關服務而使用個人資料); (b) 申請人 / 成員的銀行作繳款用途; (c) 申請人 / 成員的保險經紀(如有); (d) 申請人 / 成員的強積金中介人; (e) 受託人的關連公司(根據公司條例訂明) 包括保險公司及金融服務機構; (f) 受託人及其關連公司(不論在香港與否) 為遵守監管當局或其他機構發出之指引或其就法例、法規或法庭頒令所約束或規定之責任而需向其作出披露的任何人士; (g) 有關僱主; 及(h) 按法例要求或准許的其他人仕。

受託人可就法例准許或於獲得申請人 / 成員的同意後披露或將申請人 / 成員的個人資料作其他用途。

申請人 / 成員明白申請人 / 成員所提供之個人資料均屬自願, 然而倘若未能提供所需個人資料, 可導致受託人無法處理申請人 / 成員的申請。申請人 / 成員有權查閱及要求更正受託人持有有關成員的個人資料, 有關要求可以書面形式郵寄至香港九龍紅磡德豐街 18 號海濱廣場一座 10 樓卓譽金融服務有限公司退休金管理部經理。受託人可就處理任何該等要求收取合理費用。

Applicant/Member(s) understand(s) and consent(s) that, any personal data collected by Sun Life Trustee Company Limited ("Trustee") (whether collected in this application form or otherwise) may be used by the Trustee for the following purposes: (i) processing this application and any other applications applicant/member(s) make(s); (ii) enrolling applicant/member(s) in the Scheme; (iii) administering and managing applicant/member(s)' contributions and accrued benefits under the Scheme; (iv) conducting customer surveys; (v) researching and designing financial, insurance or pensions products for customer use; (vi) selecting and participating in reward, loyalty or privileges program and related service for applicant/member(s); (vii) contacting applicant/member(s) for the above purposes; (viii) purposes which are directly related to the above purposes; and (ix) complying with applicable laws, regulation or court order.

The Trustee may disclose member(s)' personal data for the above purposes : (a) to third parties who provide services in Hong Kong or elsewhere which assist the Trustee to carry out the above purposes, including scheme administrator (provided that such contractors are required to keep all such personal data confidential and may only use the personal data to provide those services); (b) to applicant/member(s)' bank for payment purposes; (c) to applicant/member(s)' insurance broker (if any); (d) to applicant/member(s)' MPF intermediaries; (e) to the Trustee's related companies (as defined in the Companies Ordinance) including insurance companies and financial services companies; (f) to any person to whom the Trustee or it's related companies (inside or outside Hong Kong) is under an obligation to make disclosure under the requirements of any law, regulation or court order binding on or applying to or to which the Trustee or its related companies (inside or outside Hong Kong) is subject to, or under and for the purposes of any guidelines issued by regulatory or other authorities with which the Trustee or its related companies (inside or outside Hong Kong) is expected to comply; (g) relevant employer(s) and (h) as otherwise required or permitted by law.

The Trustee may also use and disclose member(s)' personal data in other ways with applicant/member(s)' consent or as otherwise required or permitted by law.

Applicant/Member(s) understand(s) that the information applicant/member(s) gave is voluntary, but failure to provide the requested personal data may mean the Trustee is unable to process applicant/member(s)' application. Applicant/Member(s) has/have the right to seek access to and request correction of any personal data the Trustee holds by sending a written request to The Manager, Pensions Administration Department, BestServe Financial Limited, 10/F, One HarbourFront, 18 Tak Fung Street, Hung Hom, Hong Kong. The Trustee may charge a reasonable fee for the processing of any such requests.