

Set Up / Change of Voluntary Contribution 成立 / 更改自願性供款表格

Notes

- All information may be treated by Manulife in the same manner as mentioned in the "Notice to Customers relating to the Personal Data (Privacy) Ordinance" ("Notice"). In case you have not read the Notice before, you can obtain such Notice from your Manulife's intermediary or through Manulife's website at www.manulife.com.hk.
- By writing to the Privacy Officer of Manulife Provident Funds Trust Company Limited, you can correct and have access to your personal data.
- The information of the contact person(s)/authorized person(s) is collected in their official capacities.
- Please use BLOCK LETTERS to complete this Form and initial next to any corrections you make. Manulife will process this change request upon receipt of this completed form and all pertinent document(s), if any.
- Please note that any changes relating to Mandatory Contributions or Voluntary Contributions that will alter to the detriment of a member's vested benefits or accrued rights under the sub-scheme would require approval from the Mandatory Provident Fund Schemes Authority (the "MPFA") before the change can take effect.
- Please ensure due communication has been made with the concerned member(s) for the set up or change(s) of voluntary contributions as specified in this form.

注意事項

- 宏利可按於《有關個人資料(私隱)條例》的客戶通知(「通知」)所述,處理有關資料。假如閣下未有細閱該通知,閣下可從閣下的宏利中介人或透過宏利網址www.manulife.com.hk取得該通知。
- 閣下可以書面向宏利公積金信託有限公司之個人資料主任更改及查閱閣下之個人資料。
- 聯絡人/獲授權人士的資料乃因應其職務身份而收集。
- 請以正楷填寫本表格。如須作出任何刪改,請於刪改處旁簽署。宏利將於收訖本填妥表格或有關文件(如有)後處理是項申請。
- 請注意,任何與強制性供款或自願性供款有關之修改,若會損害成員在附屬計劃下的既有利益或累積權益,則該項修改須在獲得強制性公積金計劃管理局的批准後方可生效。
- 請確保已就本表格所列有關設立或更改自願性供款之事宜與所有有關成員作出適當溝通。

Section I - Employer Details 第一部份 - 僱主資料

- Employer (Company) Name 僱主(公司)名稱: _____
- MPF Sub-Scheme Number 強積金附屬計劃編號: _____ Billing Class Number 分組編號: _____
- Proposed Effective Date 建議生效日期*: _____ (dd日 / mm月 / yyyy年)

* One-month prior notice to the Trustee and the concerned member(s) is required to change the existing voluntary contribution particulars. This Proposed Effective Date shall be deemed as one month from (a) the date that the Trustee receives this form; or (b) the Proposed Effective Date provided herein; or (c) one month from the date of receipt by the Trustee of the approval by the Mandatory Provident Fund Schemes Authority (if applicable), **whichever is the later.**

* 更改現有自願性供款詳情須提前一個月通知受託人及有關成員。建議生效日期應被視為自 (a) 受託人收訖此表格後一個月;或 (b) 本表格所載的建議生效日期;或(c) 受託人取得強制性公積金計劃管理局的批准(如適用)後一個月,以較後者為準。

Section II - Request Details 第二部份 - 申請詳情

REMINDER: For the change(s) which will alter to the detriment of member's vested benefits or accrued rights under the sub-scheme, please provide a copy of written consents from the concerned members of the proposed change with this request for obtaining the approval of Mandatory Provident Fund Schemes Authority (MPFA).

提示:如有關更改會對成員於附屬計劃下的既得權益或累積權益造成損害,請提供有關成員對此更改建議之同意書副本並連同本表格一併遞交,以便取得強制性公積金計劃管理局(「積金局」)的批准。

Please ✓ where appropriate. 請在適當的地方加上 ✓ 號。

- ☐ Set up of voluntary contributions/Addition of member category (Please attach a list of concerned member(s))
設立自願性供款/新增成員類別(請附上有關成員之名單)
- ☐ Change of vesting scale and benefit entitlement
更改歸屬比例及享有權益
- ☐ Change of member category (Please attach a list of concerned member(s))
更改成員類別(請附上有關成員之名單)
- ☐ Cessation of voluntary contributions
終止自願性供款

Section III - Vesting Scale and Benefit Entitlement Details 第三部份 - 歸屬比例及享有權益詳情

REMINDER: According to governing rules of the Manulife Global Select (MPF) Scheme, there are specific circumstances where the member shall become fully vested with the balances of voluntary contributions made by the Employer ("ERVC Balances"). Please check this box ☐ if the ERVC Balances should only be paid to a member who has reached the normal retirement age of 65, and Manulife has been notified of the termination of employment of that member. This will be applicable to all the member categories under the sub-scheme stated in Section I.

提示:根據宏利環球精選(強積金)計劃的管限規則,在特定情況下僱主為成員作出的自願性供款所得的結餘(「僱主自願性供款結餘」)將悉數歸屬於成員。如您希望僱主自願性供款結餘在成員年滿65歲,且宏利獲通知其已終止受僱後才可發放,請刪選此方格。此將適用於第一部份所列的附屬計劃下所有成員類別。

Please read the instructions below carefully before completing this part.
在填寫此部份前,請細閱以下指引。

- Please provide the base of vesting scale and the vesting scale for each member category by filling out the table in this Section. If necessary, please append separate sheet(s) with the required information as listed in the table and endorsed with authorized signature and company chop which match with those in Section IV.
請填寫此部份之列表以提供有關成員類別的歸屬比例計算方法及歸屬比例。如有需要,請另頁詳列下表所需資料並以與第四部份相同的獲授權人士簽署及公司印章確認,隨本表格附上。
- Please provide the name of member(s) with his/her HKID/passport number or member account number in the member list for the respective member category for the set-up/change of voluntary contributions and/or member category.
請於有關成員類別之成員名單提供成員姓名及其香港身份證號碼/護照號碼或成員帳戶號碼,以設立/更改自願性供款及/或成員類別。
- If no option is being selected under "Base of Vesting Scale" for setting up of voluntary contribution/addition of member category, it would be deemed as "Year of Service".
就設立自願性供款/新增成員類別,如您沒有在「歸屬比例計算方法」選項中作出選擇,將以「服務年期」作歸屬比例計算方法。

Section III - Vesting Scale and Benefit Entitlement Details (continued) 第三部份 - 歸屬比例及享有權益詳情 (續前頁)

Member Category 成員類別	Base of Vesting Scale 歸屬比例計算方法	Vesting Scale 歸屬比例	Age of Full Entitlement (before statutory retirement age) [Optional] 享有悉數歸屬權益的年齡 (法定退休年齡之前) [可選填]
<input type="checkbox"/> Category Name: All Members 類別名稱: 所有成員 (This category is mutual exclusive from other categories, i.e. if "All Members" is selected, no other category could be selected 此類別並不能與其他類別同時選擇, 即如果選擇「所有成員」, 則無法選擇其他類別。) 	<input type="checkbox"/> Year of Service 服務年期 <input type="checkbox"/> Year of Participation to the Sub-Scheme 參與附屬計劃年期 	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Anytime 100% 任何年期 100% 	<input type="checkbox"/> _____ years old or above 歲或以上 <input type="checkbox"/> _____ years old or above with _____ year(s) of service/ year of participation to the sub-scheme (according to the base of vesting scale) _____ 歲或以上且服務年期/參與附屬計劃年期 (按照歸屬比例計算方法) 達 _____ 年
<input type="checkbox"/> Category Name: _____ 類別名稱: _____ Member List 成員名單: Example: Chan Tai Man (HKID#A123456(7)) 例子: 陳大文 (HKID#A123456(7)) 	<input type="checkbox"/> Year of Service 服務年期 <input type="checkbox"/> Year of Participation to the Sub-Scheme 參與附屬計劃年期 	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Anytime 100% 任何年期 100% 	<input type="checkbox"/> _____ years old or above 歲或以上 <input type="checkbox"/> _____ years old or above with _____ year(s) of service/ year of participation to the sub-scheme (according to the base of vesting scale) _____ 歲或以上且服務年期/參與附屬計劃年期 (按照歸屬比例計算方法) 達 _____ 年
<input type="checkbox"/> Category Name: _____ 類別名稱: _____ Member List 成員名單: Example: Chan Tai Man (HKID#A123456(7)) 例子: 陳大文 (HKID#A123456(7)) 	<input type="checkbox"/> Year of Service 服務年期 <input type="checkbox"/> Year of Participation to the Sub-Scheme 參與附屬計劃年期 	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> Anytime 100% 任何年期 100% 	<input type="checkbox"/> _____ years old or above 歲或以上 <input type="checkbox"/> _____ years old or above with _____ year(s) of service/ year of participation to the sub-scheme (according to the base of vesting scale) _____ 歲或以上且服務年期/參與附屬計劃年期 (按照歸屬比例計算方法) 達 _____ 年

A : Year 年期	%百分比	B : Year 年期	%百分比	C : Year 年期	%百分比
Less than 3	少於三年	0	Less than 1	少於一年	0
3 but less than 4	滿三年但少於四年	30	1 but less than 2	滿一年但少於二年	10
4 but less than 5	滿四年但少於五年	40	2 but less than 3	滿二年但少於三年	20
5 but less than 6	滿五年但少於六年	50	3 but less than 4	滿三年但少於四年	30
6 but less than 7	滿六年但少於七年	60	4 but less than 5	滿四年但少於五年	40
7 but less than 8	滿七年但少於八年	70	5 but less than 6	滿五年但少於六年	50
8 but less than 9	滿八年但少於九年	80	6 but less than 7	滿六年但少於七年	60
9 but less than 10	滿九年但少於十年	90	7 but less than 8	滿七年但少於八年	70
10 or more	十年或以上	100	8 but less than 9	滿八年但少於九年	80
			9 but less than 10	滿九年但少於十年	90
			10 or more	十年或以上	100

<input type="checkbox"/> Members aged 65 or above 年屆65歲或以上之成員 Member List 成員名單: Example: Chan Tai Man (HKID#A123456(7)) 例子: 陳大文 (HKID#A123456(7)) 	<input checked="" type="checkbox"/> Year of Service 服務年期 	<input checked="" type="checkbox"/> Anytime 100% 任何年期 100% 	Not applicable 不適用
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Section IV - Declaration 第四部份 - 聲明

I/We being the Employer under the above Sub-Scheme hereby declare that the information provided in this form is complete, true and correct and have read and understood the full details (including but not limited to the Notes and instructions) of this form.
本人/吾等為以上附屬計劃的僱主, 謹此聲明此表格內所提供的資料均屬完整, 真實及正確, 並已細閱及明白此表格內的所有內容 (包括但不限於注意事項及指引部份)。

I/We have made due communication relating to the voluntary contribution arrangement to the all the concerned members, and confirm that their necessary consent has been obtained (if applicable).
本人/吾等已就有關自願性供款之安排向所有有關成員作出適當之溝通及確認已獲所需之同意 (如適用)。

I/We shall make voluntary contributions for members and deduct the respective member voluntary contribution amounts from their salaries and submit on behalf of the members (if applicable).
本人/吾等將為成員作自願性供款, 並將為個別成員在其入息中扣除成員自願性供款 (如適用) 及代表其僱員向受託人支付有關之自願性供款款項。

The details specified in this form shall apply for the purpose of the sub-scheme and shall form part of the Participation Agreement.
此表格上之資料將適用於附屬計劃, 並將作為參與協議之一部份。

I/We understand that in case of any dispute between any members and me/us relating to the voluntary contribution arrangement, I/we will assume full responsibility in resolving such dispute.
本人/吾等明白如本人/吾等和任何成員之間就自願性供款安排產生任何爭議, 本人/吾等自當負責解決有關之爭議。

Authorized Signature and Company Chop
獲授權人士簽署及公司印章

Name & Title (in Block Letters)
姓名及職銜 (正楷)

Date
日期

* Warning: Section 43E(1) of the Mandatory Provident Fund Schemes Ordinance makes it an offence punishable with a maximum of 1 year imprisonment for the first occasion and 2 years' imprisonment on each subsequent occasion for a person who makes a false or misleading statement in a material aspect.
* 警告: 根據強制性公積金計劃條例第43E(1)條, 倘任何人士在重要事項方面提供虛假或誤導聲明, 初犯者最高可被判處一年監禁, 而再犯者則每次最高可被判處兩年監禁。

Completed form should be sent to the scheme administrator,
"Hong Kong Retirement, Manulife (International) Limited, 21/F., Tower A, Manulife Financial Centre, 223 - 231 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong".
請將填妥的表格寄交計劃管理人「香港九龍觀塘偉業街223 - 231號宏利金融中心A座21樓宏利人壽保險 (國際) 有限公司香港退休業務部」。