

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，請先閱讀下列**重要資料**：

Filling In This Form
填寫表格

- (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 “**Hong Kong Retirement, Manulife (International) Limited, 21/F., Tower A, Manulife Financial Centre, 223-231 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong**” 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寄交「**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**」，以便處理有關申索。若提供的任何資料不正確或不完整，有關受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 information collected from you and in respect of you in support of this claim for payment of benefits can be used by Manulife, relevant trustee(s), service provider(s), and the government or regulatory bodies including the Mandatory Provident Fund Schemes Authority (“MPFA”) in activities relating to the processing of your claim. The information may be transferred to other division(s) within Manulife, the relevant trustee(s), government or regulatory bodies including the MPFA or other parties including delegates, intermediaries or any service providers of Manulife or the relevant trustees, for such purpose(s) or for a purpose directly related to such purpose(s). All data processes may involve a transfer of information to places either within or outside the Hong Kong Special Administrative Region.
宏利、有關受託人、有關服務提供者及政府機構或監管機構，包括強制性公積金計劃管理局（簡稱「積金局」）可使用從您收集及關於您的資料以處理您在本表格內要求的申索事宜。為達致該等目的，或直接與該等目的有關的目的，所提供的資料可移轉予宏利內其他部門、有關受託人、政府機構或監管機構，包括積金局，或其他人士/團體，包括宏利或有關受託人的受委託者、強積金中介人或任何服務提供者。所有資料處理過程或會涉及資料移轉至香港特別行政區或以外地區。
- (f) The MPFA and other regulatory bodies in any jurisdiction shall be authorized to inspect any information under the scheme.
積金局及任何司法管轄區的其他監管團體將獲授權查看計劃內的任何資料。
- (g) By writing to the Privacy Officer of Manulife Provident Funds Trust Company Limited, you can correct and have access to your personal data.
您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您的個人資料。
- (h) 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 through Manulife's website at www.manulife.com.hk.
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。假如您未有細閱該通知，您可透過宏利網址www.manulife.com.hk取得該通知。

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

- (i) 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 MPF Scheme Brochure and the Key Scheme Information Document of the Manulife Global Select (MPF) Scheme (“Scheme”) at www.manulife.com.hk or contact our Member Hotline on (852) 2108 1388 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。詳情請查閱於宏利網站www.manulife.com.hk之宏利環球精選（強積金）計劃（「本計劃」）之強積金計劃說明書及主要計劃資料文件或聯絡宏利成員熱線（852）2108 1388查詢。
- (j) 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 MPF Scheme Brochure and the Key Scheme Information Document of the Scheme or contact our Member Hotline 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。詳情請查閱本計劃之強積金計劃說明書及主要計劃資料文件或致電宏利成員熱線查詢。

- 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。您向受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. When one or more instruction(s) from members, such as subscription, redemption or switching instructions, are also being processed and with units to be issued/redeemed (except for the Interest Fund where investment to be made in or monies to be withdrawn from) on the same dealing day as the dealing day scheduled for the annual de-risking, such instruction(s) and the annual de-risking in respect of such member will take place on the same day. In such case, the annual de-risking will only take place after processing those instruction(s). For details of the DIS, including its automatic de-risking features and fee level, you may refer to the MPF Scheme Brochure and the Key Scheme Information Document of the Scheme or the related information which is available on our website.

如您已年滿或快將年滿50歲，而現時您的權益是按照本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。若一項或多項指示，如認購、贖回或轉換指示，於有關成員的每年降低風險之預定交易日辦理，而在同一交易日發行/贖回有關單位（利息基金則為對其進行投資或從中提取款項），該等指示將與有關成員的每年降低風險安排同日進行。在此情況下，每年降低風險安排僅會在該等指示獲處理後進行。如欲了解預設投資策略詳情，包括其自動降低風險特點及收費水平，您可參考本計劃之強積金計劃說明書及主要計劃資料文件或相關資料，有關資訊可見於宏利網頁。

Enquiries 查詢

- Please contact our Member Hotline on (852) 2108 1388 for enquiries about account details and information on the Scheme or funds. You may also visit our website at www.manulife.com.hk for relevant information.

如欲查詢帳戶詳情及本計劃或基金的資料，請聯絡宏利成員熱線(852) 2108 1388查詢。您亦可瀏覽宏利網站 www.manulife.com.hk 參閱相關資料。

Notes on Payment of Benefit 支付權益備註

- The benefits will be paid to the claimant by cheque upon receipt of a completed form and the required documents.
於收齊填妥的表格及所需證明文件後，申索人方獲支付權益。有關權益將以支票形式發還。
- Any outstanding contribution/surcharges in relation to the member's account concerned, if recoverable, will be paid to the claimant as soon as practicable after receiving it.
如能收回與成員帳戶有關的未清繳供款/附加費，則在接獲該等款項後將在切實可行範圍內盡快付予申索人。

Section I – Details Of The Scheme Member / Claimant Note 1

第一部份 – 計劃成員 / 申索人^{註1}資料

(1) **Scheme Member Details** 計劃成員資料

(i) Name^{Note 2} (as shown on your Hong Kong Identity (HKID) Card) 姓名^{註2} (與您的香港身份證上的姓名相同)

| | | |
|-------------------------|----------------------------|----------------------|
| Surname in English 英文姓氏 | Given Name in English 英文名字 | Name in Chinese 中文姓名 |
|-------------------------|----------------------------|----------------------|

(ii) Identification 身份證明

| | |
|----------------------------------|----------------------------------------------------------------------------------------|
| HKID Card Number 香港身份證號碼: () | Passport Number 護照號碼: (ONLY for scheme member without HKID Card 本欄僅供沒有香港身份證的計劃成員填寫) |
|----------------------------------|----------------------------------------------------------------------------------------|

(iii) Contact Details 聯絡資料

| | | |
|--------------------------------|-----------------------------|---------------------|
| Daytime Phone Number 日間聯絡電話號碼: | Mobile Phone Number 手提電話號碼: | Email Address 電郵地址: |
|--------------------------------|-----------------------------|---------------------|

(2) **Claimant Details** 申索人資料 (If Different From The Scheme Member 如與計劃成員不同)

(i) Name^{Note 2} (as shown on your Hong Kong Identity (HKID) Card) 姓名^{註2} (與您的香港身份證上的姓名相同)

| | | |
|-------------------------|----------------------------|----------------------|
| Surname in English 英文姓氏 | Given Name in English 英文名字 | Name in Chinese 中文姓名 |
|-------------------------|----------------------------|----------------------|

(ii) Identification 身份證明

| | |
|----------------------------------|-------------------------------------------------------------------------------|
| HKID Card Number 香港身份證號碼: () | Passport Number 護照號碼: (ONLY for person without HKID Card 本欄僅供沒有香港身份證的人士填寫) |
|----------------------------------|-------------------------------------------------------------------------------|

(iii) Contact Details 聯絡資料

| | |
|--------------------------------|-----------------------------|
| Daytime Phone Number 日間聯絡電話號碼: | Mobile Phone Number 手提電話號碼: |
|--------------------------------|-----------------------------|

Please complete this section only if 請於下列情況下才填寫此部份:

- The scheme member's current address is different from the one shown on the latest Member Benefit Statement; or 計劃成員現居地址有別於最近期的成員權益報表上所載的地址; 或
- Claimant is different from the scheme member 申索人與計劃成員不同。

(iv) 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 地區 / Country 國家名稱 (if not Hong Kong 如非香港地區) | | | H.K. 香港 / KLN. 九龍 / N.T. 新界 (delete whichever is not applicable 請刪去不適用者) |

The below part is for scheme member to tick "✓" only, not suitable for claimant if claimant is other than the holder of this scheme member account.

以下部份只供計劃成員以剔號「✓」指示。如申索人並非此計劃成員帳戶的持有人，則不適用於申索人。

The above address applies to all of the member's products / services in Hong Kong and Macau provided by all companies within the Manulife group of companies and also companies which provide trustee / custodian services to Manulife.

閣下所提供的住址，適用於成員持有，並由宏利集團旗下公司，以及為本公司提供信託 / 託管服務的公司，於香港及澳門所提供的產品 / 服務上。

To apply the above address to this scheme member account only, please "✓" this box. 如以上地址只適用於此計劃成員帳戶，請在方格內填上「✓」號。

Section II – Details Of The Claim

第二部份 – 申索資料

(1) **Account Information** 帳戶資料 (Please ✓ The Appropriate Box 請在適當的方格內填上 ✓ 號)

Name of Scheme 計劃名稱: Manulife Global Select (MPF) Scheme 宏利環球精選 (強積金) 計劃

- All accounts under the Scheme 本計劃內所有帳戶
- Selected account(s) under the Scheme 本計劃內的指明帳戶 (please specify the scheme member account no.^{Note 3} 請註明計劃成員帳戶號碼^{註3})

(1) _____ (2) _____ (3) _____

If you do not tick "✓" the above options or have stated the member account number but without ticking the box, it will be deemed that the request for withdrawal of benefits applies to **ALL** your member account(s)[^].

如沒有以剔號「✓」選擇上列選項或只提供成員帳戶號碼而沒有加上剔號作實，將視作您指示宏利從您的**所有**成員帳戶[^]內提取權益。

[^] Member account(s) include(s) account(s) of Tax Deductible Voluntary Contribution account member, self-employed person, employee member and/or personal account member under Manulife Global Select (MPF) Scheme. For withdrawal from the Flexi Retirement Contribution member account, please submit "Request for Withdrawal of Flexi Retirement Contribution".

[^] 成員帳戶包括在宏利環球精選 (強積金) 計劃內之可扣稅自願性供款成員帳戶，自僱人士成員帳戶，僱員成員帳戶及/或個人帳戶。有關自選退休供款之成員帳戶之提取，請遞交「提取自選退休供款申請表」。

Section II – Details Of The Claim

第二部份 – 申索資料

(2) Grounds 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及註5} (請在適當的方格內填上 ✓ 號)

| Grounds 理由 | Required Document(s) ^{Note 4} / information to be submitted with this form 須與本表格一併遞交的文件 ^{註4} / 資料 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Permanent Departure from Hong Kong 永久性地離開香港 PD Eligibility 資格 1. Claimant departed / will depart from Hong Kong to reside elsewhere with no intention of returning for employment or to resettle in Hong Kong as a permanent resident. 申索人經已 / 將離開香港往其他地方居住並且無意作為永久性居民返回香港工作或再定居。 2. Claimant has not previously claimed payment for any benefits in any scheme on grounds of permanent departure from Hong Kong on an earlier departure date 申索人並沒有在某較早日期以永久性地離開香港為理由而向任何計劃提出權益的申索。 Please Specify 請註明: Information on overseas settlement 海外定居資料 (i) 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: _____ (ii) Overseas contact details 海外聯絡資料: Address 地址: _____ Phone Number 電話號碼: (_____) _____ Fax 傳真號碼: (_____) _____ E-mail Address 電郵地址: _____ (iii) Reason(s) for permanently departing from Hong Kong 永久離開香港原因: <input type="checkbox"/> Emigration 移民 <input type="checkbox"/> Marriage 結婚 <input type="checkbox"/> Family reunion 家庭團聚 <input type="checkbox"/> Long-term overseas employment 長期海外受聘 <input type="checkbox"/> Retirement 退休 <input type="checkbox"/> Others, please specify 其他, 請註明 _____ | 1. 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 ^{Note6} ; 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} ; 2. 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); 3. the original statutory declaration form on permanent departure (+Form MPF(S)-W(SD2)) ^{Notes 5 & 7} ; and 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)正本 ^{註5及7} ; 及 4. a copy of the Letter of Release issued by the Inland Revenue Department, if applicable 稅務局發出的同意釋款書副本, 如適用 |
| <input type="checkbox"/> Total Incapacity 完全喪失行為能力 TI Eligibility 資格 1. Claimant is permanently unfit to perform the kind of work that he was last performing before becoming incapacitated 申索人永久不適合再擔任其於喪失工作能力前所擔任的該類工作 | 1. 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 ^{Note6} ; 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 2. a copy of the medical certificate (+Form MPF(S)-W(M)) certifying total incapacity ^{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 ^{Note10} 罹患末期疾病 ^{註10} CI Eligibility 資格 1. Claimant who has an illness that is likely to reduce the life expectancy of the claimant to 12 months or less has a terminal illness. 申索人患有相當可能令該申索人的預期壽命減至12個月或以下的任何疾病, 則該申索人屬罹患末期疾病 | 1. 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 ^{Note6} ; 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 2. a copy of the medical certificate certifying terminal illness (+Form MPF(S)-W(T)) ^{Note8} dated not earlier than 12 months before the date on which the claim is lodged. 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 SB Eligibility 資格 1. Claimant does not intend to become employed or self-employed 申索人無意成為受僱或自僱人士 2. Accrued benefits kept in the scheme do not exceed HK\$5,000 as at the date of claim 計劃中保存的累算權益在提出申索當日不超過港幣五千元 3. At least 12 months have elapsed since the contribution day in respect of the latest contribution period for which a mandatory contribution is required to be made to any registered scheme by or in respect of the claimant's account(s) under the Mandatory Provident Fund Schemes Ordinance 自根據《強制性公積金計劃條例》須就所申索之帳戶作出強制性供款的最近一個供款期的供款日起計, 已過了至少12個月 4. Claimant does not have accrued benefits kept in any other registered scheme 申索人並無在任何其他註冊計劃內保留累算權益 | 1. 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 ^{Note6} ; 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 2. 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)正本 ^{註5及7} |
| <input type="checkbox"/> Death 身故 D Eligibility 資格 1. Only the personal representative of the deceased member can claim for payment of accrued benefits ^{Note1} 只有身故成員的遺產代理人才可申索累算權益 ^{註1} | 1. 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 ^{Note6} ; 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 2. (a) a copy of the Letter of Probate or Letter of Administration granted by the Probate Registry; or 遺產承辦處發出的遺囑認證書或遺產管理書副本; 或 (b) a letter requesting withdrawal of the benefits issued by the Official Administrator if the claim is made by the Official Administrator 遺產管理官發出要求提取權益的信件(如申索是由遺產管理官提出) |

* You can visit the MPFA web site www.mpfa.org.hk to download a copy of the relevant form 您可登入積金局網址 www.mpfa.org.hk 下載有關表格

Section III – Authorization & Declaration

第三部份 – 授權及聲明

(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)

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*^{註1} 謹此授權受託人在以下情況終止在第II(1)部份所述的計劃成員帳戶：

- 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；
- (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
- (for self-employed person contribution account only) cessation of the self-employment, with effect from
(只適用於自僱人士供款帳戶) 終止自僱，生效日期為

(DD日/MM月/YYYY年)

(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

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 unfitness for a particular type of work” ^{Note 9} and that contract of employment has been terminated.

本人 / 我們*^{註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」^{註9} 所載有關類別的工作，而該僱傭合約已經終止。

(3) Declaration 聲明

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*^{註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並無缺漏*。

Signature of the claimant(s)

申索人簽署

Date (DD/MM/YYYY)

日期 (日 / 月 / 年)

REMINDER: Please sign only when the form is fully completed.

提示：請僅於表格填妥後方可簽署。

* delete whichever is not applicable

請刪去不適用者

- 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受託人的任何文件中，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。

Completed form should be sent to the administrator of the Scheme,

"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本計劃管理人「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」。

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部份另紙詳載各申索人的資料。在這種情況下，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部份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。

**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**

- (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受託人提供的其他報表；或
 - (iii) through the member enquiry facilities available from the trustee.
受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，請聯絡有關強積金註冊計劃 (「計劃」) 的受託人。
- (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，有關計劃的受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，亦應夾附以下文件：
- (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^{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)^{Note 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)^{Note 7} 正本 (如適用)。如使用該表格作出聲明並把該表格夾附於本申索，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. If a claimant or scheme member provides a copy of the identity card/passport when submitting this form, the information on the identity card/passport will apply to all of the member’s products/services in Hong Kong and Macau provided by all companies within the Manulife group of companies and also companies which provide trustee/custodian services (except for change of name).
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)，以供受託人核對申索人 / 計劃成員的姓名及護照號碼。若申索人或計劃成員於遞交本表格時一併提供身份證/護照副本，所提供的身份證/護照資料將適用於成員持有並由宏利集團旗下公司，以及為本公司提供信託/託管服務的公司於香港及澳門所提供的產品/服務上 (更改姓名除外)。
- (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).
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第MPF(S) – W(M)號表格並夾附於第MPF(S) – W(O)號表格。
- 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.
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而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，該計劃成員在獲支付權益後，可能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 (包括僱主及僱員部分) 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。