

Notice of Termination for Multiple Employees 多位成員終止受僱通知書

(For reporting employees termination WITHOUT Long Service Payment/Severance Payment under MPF scheme)
(只供匯報強積金計劃下並無牽涉任何長期服務金/遣散費的離職僱員資料)

Important Note 重要提示：

Please read all the information and content (including the "Notes" provided overleaf) before completing this form.
填寫本表格前，請先閱讀所有資料及內容(包括背頁所提供之「注意事項」)。

A. Details of Terminated Employee 終止僱員資料

Sub-Scheme No. : _____

附屬計劃編號

Employer (Company) Name : _____

僱主(公司)名稱

*** Reason for Termination 終止受僱理由**

(1) Termination of Employment (NT) 終止受僱

(3) Early Retirement (ER) 提前退休#

(5) Death (D) 身故#

(2) Normal Retirement (NR) 退休#

(4) Total Incapacity (TI) 完全喪失行為能力#

If the employee has Employer Voluntary Contributions, please specify the appropriate reason for termination for the purpose of determining his/her vested benefits. Otherwise it is not necessary for employer to disclose the employee's personal status apart from termination of employment.
如僱員享有僱主自願性供款，請選擇適當的終止受僱理由以作計算僱員應得的歸屬權益。否則僱主毋須披露該僱員終止受僱以外之個人狀況。

Member Account Number 成員帳戶號碼	Member Name (in English & Block Letters, as shown on HKID Card) 成員姓名 (請以英文正楷填寫並必須與身份證相同)	HKID Card No. 香港身份證號碼	Last Date of Employment 最後受僱日期 (dd日 - mm月 - yyyy年)	Reason for Termination* 終止受僱理由*				
		()	- -	<input type="checkbox"/> (NT)	<input type="checkbox"/> (NR)	<input type="checkbox"/> (ER)	<input type="checkbox"/> (TI)	<input type="checkbox"/> (D)
		()	- -	<input type="checkbox"/> (NT)	<input type="checkbox"/> (NR)	<input type="checkbox"/> (ER)	<input type="checkbox"/> (TI)	<input type="checkbox"/> (D)
		()	- -	<input type="checkbox"/> (NT)	<input type="checkbox"/> (NR)	<input type="checkbox"/> (ER)	<input type="checkbox"/> (TI)	<input type="checkbox"/> (D)
		()	- -	<input type="checkbox"/> (NT)	<input type="checkbox"/> (NR)	<input type="checkbox"/> (ER)	<input type="checkbox"/> (TI)	<input type="checkbox"/> (D)
		()	- -	<input type="checkbox"/> (NT)	<input type="checkbox"/> (NR)	<input type="checkbox"/> (ER)	<input type="checkbox"/> (TI)	<input type="checkbox"/> (D)

B. Declaration 聲明

It is DECLARED, UNDERSTOOD AND AGREED that:

Manulife shall be deemed to have the instructions from the Employer that all the member's contributions in respect of the Employee are deducted by the Employer from the Employee's payroll and any fund withdrawal or transfer of accrued benefits attributable to such contributions will be effected in accordance with the relevant provisions of the Master Trust Deed and Manulife shall not be liable for any loss or damage.

No LSP/SP is required to be paid by the Employer to any of the terminated employee(s) stated on this form and Manulife shall not be held responsible for any claims or loss suffered by the erroneous usage of this form to report termination of employees with LSP/SP.

To the best of our knowledge and belief, the information given in this form/its attachment(s) is/are correct and complete.◆

吾等明白，同意並謹此聲明：

宏利將假設僱員的所有成員供款乃依僱主指示經僱主於僱員薪金中扣除，其供款或累算權益的提取或轉移將按照本計劃規條內有關條文處理，宏利將不會就任何損失負責。

此表格上所述之終止受僱僱員均毋須支付長期服務金/遣散費。宏利將不會就僱主因誤用此表格申報終止受僱已支付長期服務金/遣散費的僱員所引致的任何索償或損失而負上責任。

據吾等所知及所信，本表格 / 附件提供的資料均屬完整無誤。◆


Authorized Signature & Company Chop of Employer
僱主的獲授權人簽署及公司印章

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

Date
日期

◆ Warning : Under section 43E of the Mandatory Provident Fund Schemes Ordinance (Cap. 485), a person who, in any document given to the Mandatory Provident Fund Schemes 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 1 year's imprisonment on the first conviction and a \$200,000 fine and 2 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 2 years and to a fine.

◆ 注意：根據《強制性公積金計劃條例》(第485章)第43E條，任何人在給予強制性公積金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。



C. Notes 注意事項

- (1) Please complete this form in BLOCK LETTERS and put a ✓ in the appropriate boxes.
請以正楷填寫本表格，並在適當空格內加「✓」號。
- (2) Please initial with company chop (where applicable) next to any corrections you make on this form.
如須作出任何刪改，請於刪改之位置旁簽署並蓋上公司印章（如適用）。
- (3) This form is ONLY used to report MPF member termination of employment which does not involve any Long Service Payment (LSP)/Severance Payment (SP). Please use the "Notice of Employee Termination" for reporting termination of employment with LSP/SP.
此表格只供僱主申報並無任何長期服務金/遣散費的強積金僱員離職之用。如有關僱員的離職涉及長期服務金/遣散費，應填寫「僱員終止受僱通知書」以作處理。
- (4) If the employee was terminated owing to dismissal for cause, please submit a completed and signed Notice of Employee Termination (MPF EE TERM) as the employee was terminated owing to dismissal for cause, please submit a completed and signed Notice of Employee Termination (MPF EE TERM)
如僱員因故革職而終止受僱，請遞交已填妥及簽署的僱員終止受僱通知書 (MPF EE TERM)
- (5) This form is not applicable for the termination of the MPF sub-scheme, termination of membership under a Manulife ORSO scheme and/or termination of the ORSO scheme.
本表格並不適用於終止強積金附屬計劃、終止宏利職業退休計劃的成員身份及/或終止宏利職業退休計劃。
- (6) For regular employee, please complete and return this form together with the last contributions to Manulife within 10 days after the last day of the calendar month in which the employee ceases employment.
請為一般僱員於僱員終止受僱所在的公曆月之最後一天的10日內把填妥的表格及最後供款交回宏利。
- (7) For casual employee, please complete and return this form to Manulife within 30 days after the employee ceases employment and make the last contributions to Manulife within 10 days after the last contribution period.
請為臨時僱員於僱員終止受僱後的30日內把填妥的表格交回宏利，並於最後一個供款期之後的10日內向宏利提交最後供款。
- (8) If there are any outstanding contributions, surcharge or unresolved Calculation Discrepancy Reports, the termination process will be deferred.
若有任何尚欠供款、附加費或未妥為處理的計算差異報告，終止受僱程序將被延誤。
- (9) Completed form can be returned by fax to (852) 2104 3504 or by mail to our correspondence address stated at the bottom of this page. Employer may also report employee termination WITHOUT LSP/SP under MPF scheme via Manulife website www.manulife.com.hk for prompt processing of the termination.
請將填妥的表格傳真至(852) 2104 3504或郵寄至本表格下述所示之宏利通訊地址。僱主亦可透過宏利網頁www.manulife.com.hk匯報強積金計劃下並無牽涉長期服務金 / 遣散費的離職僱員資料，以加快處理終止受僱程序。
- (10) Employer should advise the terminated Employee to complete a "Claim Form For Payment Of Accrued Benefits On Ground Of Attaining The Retirement Age Of 65 Or Early Retirement", "Claim Form For Payment Of Accrued Benefits On Ground Of Permanent Departure From Hong Kong / Total Incapacity / Terminal Illness / Small Balance / Death" or a "Scheme Member's Request For Fund Transfer Form" to claim or transfer his/her MPF accrued benefits as appropriate.
僱主應知會終止受僱的僱員填寫「基於已達到65歲退休年齡或提早退休的理由而申索累算權益的表格」、「基於永久性離開香港 / 完全喪失行為能力 / 罹患末期疾病 / 小額結餘 / 死亡的理由而申索累算權益的表格」或「計劃成員資金轉移申請表」以申索或轉移其強積金累算權益。
- (11) Employer is vested with the responsibility to ensure that all accrued benefits which the terminated Employee is entitled are accumulated from contributions made pursuant to the statutory and/or employment requirements and not from any unidentified source of fund.
僱主需確保此終止受僱僱員應得的所有累算權益乃根據法定及/或受聘的條款所規定的供款積存所得，而非不明來歷的資金。
- (12) If the employee will be transferred to an associated employer under intra-group transfer arrangement, please note that the original copy of a completed "Transfer of Accrued Benefits Upon Intra-group Transfer / Change of Business Ownership Form" signed by the employee, the existing employer and the new employer together with the original copy of a completed "Employer's Request For Fund Transfer Form" signed by the new employer have to be submitted to the trustee of the new employer's scheme to effect the transfer of accrued benefits. Existing employer is not required to submit Notice of Termination or Notice of Termination for Multiple Employees.
如僱員將轉職至有聯繫公司，由僱員、現僱主及新僱主所簽署之「有聯繫公司間或更改業務擁有權時之成員累算權益轉移表格」及由新僱主所簽署之「僱主資金轉移申請表」的正本需送交至新僱主計劃的受託人，以處理累算權益轉移之申請。現僱主並毋須遞交僱員終止受僱通知書或多位成員終止受僱通知書。
- (13) If the accrued benefits of the terminated Employee are currently invested according to the default investment strategy ("DIS") of the scheme, he/she should be aware that the de-risking mechanism of the DIS starts at the age of 50. When one or more instructions from members, such as subscription, redemption or switching instructions, are also being processed and with units to be issued/redeemed (in the case of 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 for a relevant member, 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).
如終止受僱成員的累算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。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。
- (14) 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。
- (15) The information of the contact person(s)/authorized person(s) is collected in their official capacities.
聯絡人 / 獲授權人士的資料乃因應其職務身份而收集。
- (16) By writing to the Privacy Officer of Manulife Provident Funds Trust Company Limited, member can correct and have access to his/her personal data.
成員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其個人資料。

Please sign and return this form by fax to (852) 2104 3504 or by mail 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".

If you choose to fax this form, please keep the fax journal for future reference and DO NOT post it again to avoid duplication.

請填妥及簽署本表格，並傳真至(852) 2104 3504 或寄交計劃管理人「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」。

如選擇傳真本表格，請保留傳真紀錄以作日後參考；為免重複，已傳真之表格，無須再寄回宏利。