

如需遞交填妥表格 **When submitting this form:**
請緊記簽署作實 Please ensure that you have signed where necessary.
請勿遞交相同表格 Please do NOT send duplicate copies.

永明彩虹強積金計劃 - 直接付款授權書

SUN LIFE RAINBOW MPF SCHEME – DIRECT DEBIT AUTHORISATION

所有部分須以英文正楷填寫。 All sections below should be completed in English and in Block letters.

日期 Date (日 dd/月 mm/年 yyyy)			
收款之一方 (受益人) Name of Party to be Credited (The Beneficiary)	銀行編號 Bank No	分行編號 Branch No.	帳戶編號 Account No.
Sun Life Trustee Company Limited	0 0 6	3 9 1	6 1 5 0 3 6 1 4

僱主名稱 / 自僱人士 / 成員姓名 (英文) *
Name of Employer / Self-employed Person / Name of Member (English) *

僱主 / 計劃編號 *
Employer / Scheme Number *

本人/吾等現授權本人/吾等之下述銀行，(根據受益人不時給予本人/吾等銀行之指示)自本人/吾等之帳戶內轉帳予上述受益人。惟每次轉帳金額不得超過以下指定之限額。I/We hereby authorise my/our below named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated below.

銀行一般需時六至八星期設立直接付款授權。授權申請成功後會寄出確認信，並列出生效日期。在生效日期前，請繼續以支票形式繳交供款。Bank will take around 6 to 8 weeks to set up direct debit authorisation ("DDA") in general. A confirmation letter with DDA effective date will be sent upon completion of your application. Please continue to submit contribution payment by cheque before the DDA effective date.

本人/吾等同意本人/吾等之銀行毋須證實該等轉帳通知是否已交予本人/吾等。I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.

如因該等轉帳而令本人/吾等之帳戶出現透支(或令現時之透支增加)，本人/吾等願共同及各別承擔全部責任。I/We jointly and severally accept full responsibility for my overdraft (or increase in existing overdraft) on my/our account, which may arise as a result of any such transfer(s).

本人/吾等同意如本人/吾等之帳戶並無足夠款項支付該等授權轉帳，本人/吾等之銀行有權不予轉帳，且銀行可收取慣常之收費，並可隨時以一星期書面通知取消本授權書。I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorisation at any time on one week's written notice.

本授權書將繼續生效直至另行通知為止。This authorisation shall have effect until further notice.

本人/吾等同意，本人/吾等取消或更改本授權書之任何通知，須於取消/更改生效日最少兩個工作天前交予本人/吾等之銀行。I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect.

本人/吾等之銀行及分行之名稱 My/Our Bank Name and Branch	銀行編號 Bank No.	分行編號 Branch No.	本人/吾等之帳戶號碼 My/Our Account No.
本人/吾等在結單/存摺上所記錄之名稱 ^{註1} (請填上英文名稱) [#] My/Our Name(s) ^{Note 1} as recorded on Statement/Passbook (Please provide the name in English) [#]			聯絡電話號碼 Contact Tel No.
本人/吾等在結單/存摺上所記錄之地址 My/Our Address as recorded on Statement/Passbook			每次付款限額 ^{註2} Limit for Each Payment ^{Note 2}
債務人編號 ^{註4} Debtor's Reference ^{Note 4}	本人/吾等之簽署 ^{註3} My/Our Signature(s) ^{Note 3}		

請簽署 Please sign here X

#請用正楷填寫。Please write in block letters.

*請刪除不適用者。Please delete as appropriate.

附註 NOTES:

- 銀行帳戶持有者名稱必須與申請公司/人相同。否則，申請將不獲接納。Name of the bank account must be the same as the name of applicant. Otherwise, the application will not be accepted.
- 如 貴戶付款之數額每次可能不相同，則請將最高額定為每次付款之最高限額。If the amount of your payments are likely to vary each time, please set the Limit for Each Payment at the **maximum amount** you would expect to pay at any one time.
- 請確保 貴戶在此欄內之簽名，與銀行帳戶所簽之完全相同。Please ensure that you sign the form in the usual way that you would sign on your Bank Account.
- 在債務人編號之欄內，不須填上任何資料。此欄須由本公司填寫。In the box marked "Debtor's Reference", please leave **BLANK** for official use.

銀行專用 For Bank Use Only

備註 Remarks _____ Signature Verified _____

For office use only:
Processed by: _____

Date: _____

Checked by: _____

Date: _____



個人資料收集聲明 PERSONAL INFORMATION COLLECTION STATEMENT

本人/吾等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) 處理本人/吾等的此項申請及任何其他申請; (ii) 為本人/吾等參與本計劃; (iii) 管理本人/吾等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) 為本人/吾等甄選及參與獎賞、忠實或特選客戶計劃; (vii) 因上述目的與本人/吾等聯絡; (viii) 與上述目的直接有關的任何其他目的; 及 (ix) 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本人/吾等的個人資料予 (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) 本人/吾等的銀行作繳款用途; (c) 本人/吾等的保險經紀(如有); (d) 本人/吾等的強積金中介人; (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; 及 (g) 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本人/吾等的同意後披露或將本人/吾等的個人資料作其他用途。

本人/吾等明白本人/吾等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本人/吾等的申請。本人/吾等有權查閱及要求更正受託人持有有關本人/吾等的個人資料, 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。

I/We understand and consent 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 I/we make; (ii) enrolling me/us in the Scheme; (iii) administering and managing my / our 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 me/us; (vii) contacting me/us 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 my/our 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 my/our bank for payment purposes; (c) to my/our insurance broker (if any); (d) to my 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 its 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 and (g) as otherwise required or permitted by law.

The Trustee may also use and disclose my/our personal data in other ways with my/our consent or as otherwise required or permitted by law.

I/We understand that the information I/we give is voluntary, but failure to provide the requested personal data may mean the Trustee is unable to process my/our application. I/We have the right to seek access to and request correction of any personal data the Trustee holds about me/us 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.

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 電話 3183 1888 傳真 3183 1889
Please send the completed form to: Sun Life Rainbow MPF Scheme, The Administrator, BestServe Financial Limited
10/F, One Harbourfront, 18 Tak Fung Street, Hunghom, Kowloon, Hong Kong Tel 3183 1888 Fax 3183 1889