

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 – 特選私人帳戶更改供款表格

### SUN LIFE RAINBOW MPF SCHEME – SPECIAL PRIVATE ACCOUNT CHANGE OF CONTRIBUTION FORM

本表格所列之更改將取代所有之前已遞交行政管理人的資料/表格。所有部分須以正楷英文填寫。  
The changes specified in this form will supersede any previous instructions on change of contribution which has/have been submitted to the Administrator.  
All sections below should be completed in English BLOCK letters.

#### 第一部分 Section I 成員資料 MEMBER DETAILS

成員姓名 Member Name \_\_\_\_\_ 計劃編號 Scheme No. \_\_\_\_\_  
電話號碼 Telephone No. \_\_\_\_\_ 香港身份證/護照號碼\* HKID Card/Passport No.\* \_\_\_\_\_

#### 第二部分 Section II 更改細則 CHANGE DETAILS

[請在適當方格加上剔號 (✓)。 Please check (✓) the appropriate box.]

##### 供款模式 Contribution Mode

按月供款 Monthly Basis 更改生效日期 Effective Date of Change 

0	1								
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 (日/月/年 DD/MM/YYYY)

按月供款的最低供款金額為 300 港元。按月供款必須以自動轉帳繳付，而繳付供款扣帳日期為每月的 10 號或下一個銀行營業日(如扣帳日並非銀行營業日)。  
The minimum amount of monthly contribution is HK\$300. The monthly contribution must be made by autopay and the debit date will be on 10<sup>th</sup> of each calendar month or the following bank business day if the debit day is not a bank business day.

更改供款模式為按月供款，按月供款金額為：港幣 HKD \_\_\_\_\_  
Change contribution mode to monthly basis and the monthly contribution amount is:  
請另行填寫「直接付款授權書」並連同本表格遞交。辦理自動轉帳手續需時約六至八星期。自動轉帳的生效日期將另函通知閣下。閣下可考慮於自動轉帳安排正式生效前採用支票以整筆供款模式作出供款。  
Please complete a "Direct Debit Authorization Form" and submit with this form. The autopay set up takes approximately 6 to 8 weeks from receipt of your completed form. We will notify you the effective date of autopay. You may make lump-sum payment by cheque before your autopay facility is established.

更改已設定按月供款金額至：港幣 HKD \_\_\_\_\_  
Change of existing monthly contribution amount to:  
請確定閣下的銀行帳戶「每月/月付款限額」的設定已足夠支付新更改的每月供款金額。  
Please ensure the 'Limit for Each Payment/Month' set for autopay in your bank account is sufficient for the revised monthly contribution settlement.

整筆供款 Lump Sum Basis 整筆供款最低供款金額為 3,000 港元。請遞交劃線支票或銀行本票，並連同本表格一併寄回。港幣 HKD \_\_\_\_\_  
The minimum amount of lump sum contribution is HKD3,000. Please submit a crossed cheque or bank draft with this form.

請附上抬頭為「永明信託有限公司 – 強積金」的劃線支票或銀行本票。  
The crossed cheque or bank draft is made payable to "Sun Life Trustee Company Limited – MPF".

銀行名稱 Bank Name \_\_\_\_\_ 支票號碼 Cheque No. \_\_\_\_\_

備註：請於支票或銀行本票背面寫上您的姓名及計劃編號以作參考。  
Notes: Please quote your Full Name and Scheme No. at the back of the cheque or bank draft for reference.

終止供款 Cessation of Contribution  
生效日期 Effective Date 

0	1								
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 (日/月/年 DD/MM/YYYY)

辦理終止供款手續需時約五個工作天。閣下須於生效日最少五個工作天之前將本表格交予行政管理人。  
The cessation of contribution takes approximately 5 working days. You should submit this form to the Administrator at least 5 working days prior to the effective date.

\* 請刪除不用者。 Please delete whichever is inappropriate.



### 第三部分 Section III

### 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士。

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.

### 第四部分 Section IV

### 聲明 DECLARATION

本人(成員)現授權永明彩虹強積金計劃的受託人為本人賬戶進行上述更改。本表格所列之更改將取代所有其他之前已遞交行政管理人的資料/表格。

I, the member, hereby authorize the Trustee of Sun Life Rainbow MPF Scheme to execute the above change(s) for my account.

The changes specified in this form will supersede any previous instructions on change of contribution which has/have been submitted to the Administrator.

成員簽署 Signature of Member:

**請簽署 Please sign here X**

日期 Date :

**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

#### 只供本公司使用 FOR OFFICE USE ONLY

調整後之供款額 > 直接付款授權限額? Revised contribution amount > DDA limit?

是 Yes  否 No

直接付款授權是否失效? Is DDA status inactive?

是 Yes  否 No

\* 如以上任何選擇"是", 寄「直接付款授權書」予成員作出更改授權限額及/或重置直接付款授權。

If any of the above is "yes", send "DDA form" to member to increase limit and/or reactivate DDA status.

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_ Checked by: \_\_\_\_\_ Date: \_\_\_\_\_