To 致: AIA International Limited 友邦保險(國際)有限公司
(Incorporated in Bermuda with limited liability 於百慕達註冊成立之有限公司)
8/F, AIA Financial Centre, 712 Prince Edward Road East, Kowloon, Hong Kong
香港九龍太子道東 712 號友邦九龍金融中心 8 樓
Employer Hotline 僱主熱線: 2100 1888
Member Hotline 成員熱線: 2200 6288
Fax No. 傳真號碼: 2565 0001

This form should be completed in **ENGLISH BLOCK LETTERS AND IN BLACK INK.**
Submit the signed form either by fax or mail.

本表格必須以**英文正楷及黑筆**填寫。
請以傳真或郵寄方式遞交已簽署之表格。

FORM FOR CHANGE OF EMPLOYER PARTICULARS
僱主資料更新表格

Employer Name 僱主名稱 : Property Finder Limited

Employer Plan No. 僱主計劃編號 : E4JA01

Effective date 生效日期： | 2024 (yyyy 年) | / | 04 (mm 月) | / | 01 (dd 日) | (1 month prior notice is required 請於生效日期一個月前通知)

Notes 注意事項：

If there is any change in circumstances which affects the status of tax residency (ies) of the Entity/Sole Proprietor, you/your company must notify the Trustee within 30 days and provide an updated Self-Certification. Please scan the QR code on the right, to download the "Self-Certification Form – Entity/Sole Proprietor (For Hong Kong)", complete the form and return it to us. If you have any questions regarding the tax residency of Entity/Sole Proprietor", please consult your tax adviser or visit the OECD and Inland Revenue Department's AEOI website, for more related information.
若有關實體/獨資經營者的稅務居民身份狀況有變化，你/你公司必須在改變後的 30 天內通知受託人有關的改變並提供最新的自我證明。請掃瞄右方的二維碼，以下載「自我證明表格–實體/獨資經營者(香港適用)」，並寄回已填妥之表格給我們。若對實體/獨資經營者之的稅務居民身份存有任何疑問，請詢問專業稅務顧問或瀏覽 OECD 及稅務局有關自動交換財務賬戶資料的網頁，以獲取更多相關資料。

[Self-Certification Form – Entity/Sole Proprietor (For Hong Kong)]
[自我證明表格–實體/獨資經營者(香港適用)]

❒ **New Company Name 新公司名稱：**

(applicable only to the Employer whose business registration no. has not been changed; please attach a copy of valid Business Registration Certificate and a copy of Certificate of Incorporation on Change of Name (if applicable)
只適用於沒有更改商業註冊號碼之僱主使用；請附上有效的商業登記證副本及公司更改名稱註冊證書副本(如適用)

English 英文: _____

_____

Chinese 中文: _____ _____
New Company Chop 新公司印鑑

❒ **New Principal Place of Business 新主要營業地址：**

Flat/Room 單位/室	Floor 樓	Block 座數
Building 大廈		
Street/District 街道/地區		
☐HK 香港 ☐KLN 九龍 ☐NT 新界	Country 國家 (applicable to non-Hong Kong address 適用於非香港地址)	

New Correspondence Address 新通訊地址： (If different from the above 如跟上述地址不同)

Flat/Room 單位/室	Floor 樓	Block 座數
Building 大廈		
Street/District 街道/地區		
☐HK 香港 ☐KLN 九龍 ☐NT 新界	Country 國家 (applicable to non-Hong Kong address 適用於非香港地址)	

❒ **New Tel. No. 新電話號碼:** [852] _____

❒ **New Fax No. 新傳真號碼:** [852] _____

❒ **New Contact Person (primary) 新第一聯絡人：**

❒ Mr. 先生 ❒ Ms. 女士

Name 姓名: [Eng]

［中文］

Tel. No.電話號碼: [852] _____ Fax No.傳真號碼: [852] _____

Email 電郵^: Matthew@propertyfinder.com.hk

❒ **New Contact Person (secondary) 新第二聯絡人：**

❒ Mr. 先生 ❒ Ms. 女士

Name 姓名: [Eng]

［中文］

Tel. No.電話號碼: [852] _____ Fax No.傳真號碼: [852] _____

Email 電郵^: _____

^ If you wish to receive our e-Communications by the email(s) of new contact person(s), please complete "e-Communications Preference" below, otherwise, we will send out the e-Communications according to your current email address(es) and preference. For details of your current e-Communications preference, please log into aia.com.hk

如貴公司希望新聯絡人的電郵地址同時接收本公司的電子通訊, 請同時填妥下方的 "電子通訊選擇", 否則本公司將按照你現有的電子通訊電郵地址及選項發送, 有關你現有電子通訊選擇的詳情, 請登入aia.com.hk查閱。

❒ **e-Communications Preference 電子通訊選擇：**

If you wish to update email(s) for our e-Communications, please provide up to 3 email address(es) below. The updates below will replace the email records that currently in use to receive our e-Communications, if you wish to retain any email(s) that currently in use for our e-Communications, please fill in that email(s) together with the updates. For details of your current e-Communications preference, please log into aia.com.hk

如需更新接收電子通訊的電郵地址, 請於下方提供最多三個電郵地址。下方之更新將會取代現有接收電子通訊的電郵地址紀錄，如需保留任何現有電子通訊的電郵地址，請連同更新同時填於下表。有關你現有電子通訊選擇的詳情, 請登入aia.com.hk 查閱, 或於網頁直接作出更新。

1) Email 電郵: _____

2) Email 電郵: _____

3) Email 電郵: _____

❒ **Change of Frequency of Payroll 更新發薪次數**** (you may tick more than one 可選擇多項)：

❒ Monthly 每月**(month end 月底)

❒ Semi-monthly 每半個月**(15th and month end 15 號及月底)

❒ Weekly 每週**(last day of the week i.e. Saturday 每週最後一天即星期六)

❒ Others, please specify** 其他, 請註明**:_____

(**Please provide details of affected employees, together with authorized signature and company chop, on separate sheets of paper.
請另紙提供受影響僱員的詳細資料，並附上授權簽署及公司印章。)

❒ **Set Up/Suspend Autopay for Settling Contributions and/or Annual Fee 設立/撤銷以自動轉賬繳付供款及/或年費：**

(tick one only 只可選擇一項)

❒ **Suspend** Autopay **撤銷**自動轉賬

(Please be reminded to settle contributions by other means. For details, please refer to Contribution Guide.
請以其他方式繳付供款, 詳情請參閱供款指南。)

❒ **Setup** Autopay **設立**自動轉賬 (please complete and submit a Direct Debit Authorization form# 請填交直接付款授權書#)

#As it takes approximately two months from the date of receipt of the completed Direct Debit Authorization form and this form to set up direct debit arrangement, please continue to use the existing settlement method **until you receive our notification confirming the effective date of the new arrangement.**
由於安排直接付款需時, 新選供款方式將於本公司收到已填妥之直接付款授權書及此表格起約兩個月後始能使用, 期間務請閣下繼續使用原有方式供款, **直至接獲本公司另函通知新安排生效日期為止**。

Declaration 聲明

I/We have read and understood the AIA Personal Information Collection Statement ("AIA PIC"). I/We declare and agree, and my/our employees agree, that any personal data and other information relating to me/us, or my/our employees or my/our policy(ies) or investments contained in this form or collected, obtained, compiled or held by the Trustee by any means from time to time may be collected and utilized in accordance with the AIA PIC. I/We acknowledge and consent, and I/we confirmed that I/we have been duly authorized to make such consents on behalf of my/our employees, to the transfer of the personal data relating to me/us or my/our employees in or outside of Hong Kong for the purposes and to the types of transferee as set out in the AIA PIC.

I/We further declare and confirm that the information provided by me/us to the Trustee in this form is true and correct, and hereby instruct the Trustee to amend their records accordingly.

I/We hereby authorize and acknowledge that the Trustee has the right to accept, process, execute and rely upon instructions issued in my/our name(s) and my/our signature(s) which have been sent to the Trustee. I/We agree to be bound by any such instructions sent to the Trustee under my/our name(s) and my/our signature(s).

I/We undertake to the Trustee to comply with all relevant provisions of the documentation governing the AIA MPF – Prime Value Choice to the extent applicable to the Employer and, in particular to:

- notify the Trustee in writing of any changes to the information given by me/us in this form as soon as reasonably practicable;
- provide the Trustee with such / additional information and assistance as the Trustee may reasonably require in order to enable the Trustee to comply with the Anti-Money Laundering and Counter-Terrorist Financing Ordinance and relevant requirements under the MPF Legislation.

I/We agree to indemnify and keep the Trustee and its affiliates indemnified against any and all losses, costs, expenses, actions, proceedings and liabilities suffered by the Trustee and/or its affiliates as a result of any inaccurate information provided by me/us or my/our agent or intermediary, and/or upon the Trustee's or its affiliates' execution of any such instructions except where there is proven (to the satisfaction of the Trustee or its relevant affiliate) willful default, gross negligence or fraud on the part of the Trustee or its relevant affiliate.

本人/吾等已閱讀及明白友邦保險收集個人資料聲明（「收集個人資料聲明」）。本人/吾等聲明及同意以及本公司僱員同意在此表格所載或受託人不時以任何方式收集所得、編製或持有的任何個人資料及關於本人/吾等或本公司僱員的保單或投資的其他資料，可根據收集個人資料聲明收集及使用。本人/吾等確認及同意以及本人/吾等確認本人/吾等已獲正式授權代表本公司僱員表示同意就收集個人資料聲明所述目的在香港境內轉移本人/吾等或本公司僱員的個人資料或轉移有關資料至香港境外，及轉移予收集個人資料聲明所載的資料承讓人。

本人/吾等並謹此聲明及確認，本人/吾等在此表格上提供予受託人之所有資料均為正確無誤，並在此指示受託人修改其記錄。

本人/吾等謹此授權受託人接納、處理及執行以本人/吾等名義及簽署送往受託人之指示。本人/吾等同意及接受以本人/吾等名義及簽署致受託人之任何指示約束。

本人/吾等向受託人承諾遵守所有有關適用於僱主的友邦強積金優選計劃的計劃條款，包括：

- 在合理切實可行範圍內，儘快以書面通知受託人有關任何本人/吾等於本表格作出的資料改動;
- 在合理情況下向受託人提供一切所需/額外資料及協助，使受託人能遵守《打擊洗錢及恐怖分子資金籌集條例》及強積金法例下的有關規定。

除因受託人或其相關關聯公司被證明故意失責、嚴重疏忽或欺詐外（此證明須得受託人或其相關關聯公司信納），倘若本人/吾等或本人/吾等之代理人或中介人所提供之資料錯誤及/或受託人或其關聯公司因執行相關指示，而導致受託人及/或其關聯公司需要承擔任何損失、支出、責任或需要進行任何行動或訴訟，本人/吾等同意作出有關賠償予受託人及其關聯公司。

Authorized Signature 授權人簽署	Company Chop 公司印鑑
Print Name 姓名	Date : dd/mm/yyyy 日期：日/月/年