

To 致: Bank Consortium Trust Co. Ltd. 銀聯信託有限公司  
c/o oOo Securities (HK) Group Limited (formerly known as orientiert XYZ Securities Limited)

FORM: DDA-NEW (ER) – TCM

奧翱驚集團(香港)證券有限公司 (前稱orientiert XYZ Securities Limited)

Room 3301, Tower One, Lippo Centre, No.89 Queensway, Hong Kong 香港金鐘道89號力寶中心1座33樓3301室

Fax 傳真: (852) 2172 0999 AMTD MPF Hotline AMTD 強積金熱線: (852) 2172 0909 Website 網址: [www.oogroup.xyz](http://www.oogroup.xyz)

## AMTD MPF Scheme - Direct Debit Authorisation Form – Employer

### AMTD 強積金計劃 - 僱主直接付款授權書

Please mark “✓” in the appropriate box. 請於適用的方格內填上“✓”號。

#### NOTE 注意:

1. Please write in BLOCK LETTERS. 請以英文正楷填寫。
2. Please consult your bank officer for applicable service fee, if any, charged by your bank. 請聯絡您 / 您們的銀行主任以便了解在此服務上會否收取任何費用。
3. Please be advised that it may take four to six weeks for processing your application. You are, therefore, requested to continue making your contributions by other means of payment until you receive the confirmation letter from Bank Consortium Trust Company Limited (“BCTC”) stating the effective date of the Direct Debit Authorisation service.  
申請該項服務約需時四至六星期。故此，您 / 您們在仍未收到銀聯信託有限公司（「銀聯信託」）的直接付款授權服務確認通知書及有關生效日期之前，務必繼續以其他方式繳付供款。

#### PART I. PLAN DETAILS 計劃資料

| Name of Scheme<br>計劃名稱        | Name of Party to be Credited (the Beneficiary)<br>收款人 (受益人) 名稱 | Bank Code<br>銀行編號 | Branch Code<br>分行編號 | Account No. to be Credited<br>收款帳戶之號碼 |
|-------------------------------|--|-------------------|---------------------|---------------------------------------|
| AMTD MPF Scheme<br>AMTD 強積金計劃 | Bank Consortium Trust Co Ltd as trustee of AMTD MPF Scheme     | 0 0 6             | 3 9 1               | 6 1 5 3 8 9 5 7                       |

#### PART II. DECLARATION 聲明

- (1) The Employer hereby authorises the below-named bank (“the Bank”) to effect transfers from the below account to the above account (as indicated) in accordance with such instructions as the Bank may receive from the Beneficiary from time to time.
  - (2) The Employer agrees that the Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to the Employer.
  - (3) The Employer accepts full responsibility for any overdraft (or increase in existing overdraft) on the account which may arise as a result of any such transfer(s).
  - (4) The Employer confirms that the signature(s) on this Direct Debit Authorisation Form is / are the same as that for the operation of the Savings / Current Account to be debited for the transfer.
  - (5) The Employer agrees to notify BCTC of any change of bank account or cancellation of payment method and further agrees that should there be insufficient funds in the bank account to meet any transfer hereby authorised, the Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may make the usual service charge to be paid by the Employer.
  - (6) This authorisation shall have effect until further notice.
  - (7) The Employer agrees that any notice of cancellation or variation of this authorisation which the Employer may give to the Bank shall be given at least seven working days prior to the date on which such cancellation / variation is to take effect and at the same time such notice shall be given to BCTC in writing.
  - (8) The Employer certifies that the Employer is the sole beneficial owner of the Bank account and the Employer agrees and understands that this Direct Debit Authorisation service is provided on this basis.
  - (9) BCTC may cancel this Direct Debit Authorisation service at any time on one week’s written notice without recourse.
  - (10) In consideration of BCTC agreeing to accept and act upon the instructions to initiate the making of direct debits from the designated account to BCTC’s designated accounts with Citibank (Hong Kong) Limited, the Employer agrees to indemnify BCTC and hold BCTC harmless against all actions, claims, proceedings, loss, damages, costs and expenses of whatever nature which may be brought against BCTC or suffered or incurred by BCTC and which shall have arisen either directly or indirectly out of or in connection with this direct debit authorisation arrangement.
  - (11) The Employer understands and agrees to the terms and conditions above and the terms of the Personal Information Collection Statement set out in this form.
- (1) 僱主授權下述銀行（「付款銀行」）按受益人指示隨時由僱主指定之銀行帳戶將款項交付上述指定銀行帳戶。
  - (2) 僱主同意付款銀行並無義務於每次付款時對僱主作出通知。
  - (3) 僱主接受所有因對該項付款而引致之帳戶透支(或增加透支)責任。
  - (4) 僱主確認本直接付款授權書內簽署與僱主留存於付款銀行內之儲蓄或支票帳戶簽署相同。
  - (5) 僱主同意就更改付款帳戶或取消付款方式而向銀聯信託作出通知，並同意付款銀行可在僱主帳戶存款不足情況下毋須完成此項付款，與及為此產生之一般銀行服務費用亦由僱主負責繳付。
  - (6) 此項付款授權將持續有效，直至另行通知。
  - (7) 僱主同意必須於七個工作天前就此項付款授權之任何轉變或取消向僱主付款銀行作出通知，並同時以書面知會銀聯信託。
  - (8) 僱主保證是付款銀行帳戶的唯一受益人，並且同意及明白此項直接付款授權服務是根據以上保證而提供的。
  - (9) 銀聯信託需要預早一星期前以書面通知，便可取消直接付款授權服務，並不負追索之責。
  - (10) 因銀聯信託同意接受及遵從僱主之指示由僱主指定之銀行帳戶直接將款項轉入銀聯信託在花旗銀行(香港)有限公司指定之帳戶，僱主同意就此項直接付款授權安排中所有直接或間接向銀聯信託提出或引致銀聯信託蒙受損害之一切訴訟、申索、法律程序、損失、賠償、訟費及任何性質的開支對銀聯信託作出彌償。
  - (11) 僱主明白及同意上述的條款及條件以及闡明於此表格之收集個人資料聲明條款。

\* Delete as appropriate 請刪去不適用者

| PART III. BANK ACCOUNT DETAILS 銀行帳戶資料   |  |  |  |               |  |   |  |                         |  |
|---|--|--|--|---------------|--|---|--|-------------------------|--|
| Bank Name and Branch 銀行及分行名稱  |  |  |  | Bank No. 銀行編號 |  | Branch No. 分行編號   |  | Bank Account No. 銀行帳戶編號 |  |
|   |  |  |  |               |  |   |  |                         |  |
| Name as Recorded on Statement / Passbook* 結單 / 存摺*上所記錄之名稱   |  |  |  |               |  | Business Registration / Certificate of Incorporation No. / HKID Card / Passport *No. of Account Holder 帳戶持有人之商業登記證 / 公司註冊證書編號 / 香港身份證 / 護照*號碼 |  |                         |  |
| Address as Recorded on Statement / Passbook* 結單 / 存摺*上所記錄之地址  |  |  |  |               |  | Contact Telephone No. 聯絡電話號碼  |  |                         |  |
| Name of Debtor – Employer 債務人名稱 – 僱主  |  |  |  |               |  | Signature of Account Holder 帳戶持有人簽署<br>(Please sign in the same way that you sign on your Bank Account.<br>請以銀行帳戶的簽署式樣簽署。)                    |  |                         |  |
| Participating Plan No. 參與計劃編號   |  |  | Debtor's Reference (Internal Use Only)<br>債務人參考 (內部專用) |               |  | Date (D / M / Y) 日期 (日 / 月 / 年)   |  |                         |  |
|   |  |  |  |               |  |   |  |                         |  |
| PART IV. PERSONAL INFORMATION COLLECTION STATEMENT 收集個人資料聲明   |  |  |  |               |  |   |  |                         |  |
| <p>The personal data provided by or in respect of Members and Participating Employers of the AMTD MPF Scheme (the “Scheme”) (concerning application records and operational records and / or their dealing / transaction details records) will only be accessed and handled by properly authorised staff of Bank Consortium Trust Company Limited (“BCTC”, the trustee of the Scheme), the sponsor of the Scheme (currently oOo Securities (HK) Group Limited (formerly known as orientiert XYZ Securities Limited)(“orientiert”) and their properly authorised service providers, employees, officers, directors and agents, and auditors of the Scheme, and may be used, disclosed and / or transferred (whether in or outside Hong Kong) to such persons as BCTC or any of its service providers may consider necessary, including governmental authorities and regulators, for any of the following purposes: (i) exercising or performing the functions conferred or imposed by or under or for the purposes of the Mandatory Provident Fund Schemes Ordinance (“Ordinance”); (ii) providing services in respect of Mandatory Provident Fund and the Scheme including the processing, administering, managing, and analysing of their, as the case may be, contributions, accrued benefits and portfolios and direct marketing of Mandatory Provident Fund services; (iii) improving the provision of Mandatory Provident Fund services by BCTC to customers generally (including the facilitation of the provision of Mandatory Provident Fund services to enable the customers of BCTC generally to access Mandatory Provident Fund (or other) account details, for example, through the internet; (iv) compliance with applicable laws and regulations, and court order and / or (v) any other purposes for the exercise or performance of the above mentioned functions. If there is any change in the information provided, BCTC should be notified as soon as practicable. Failure to provide the information requested may result in BCTC being unable to process the instructions. All such information may be retained after Members and Participating Employers ceased to participate in the Scheme.</p> <p>Members and Participating Employers have a right to request access to and correction of any personal data or to request that personal data about them not be used for direct marketing purposes. Requests can be made in writing to the Data Protection Officer at BCTC, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong. Under the Personal Data (Privacy) Ordinance, Members and Participating Employers have the right to obtain a copy of information held about Members and Participating Employers and for which the Members and Participating Employers may be charged a fee.</p> <p>由 AMTD 強積金計劃（「本計劃」）的成員及參與僱主所提供或相關之個人資料（有關申請及運作記錄）及 / 或他們的買賣 / 交易細節記錄僅供銀聯信託有限公司（「銀聯信託」，本計劃之受託人）、本計劃之保薦人（現為奧聯證券集團(香港)證券有限公司(前稱 orientiert XYZ Securities Limited)（「orientiert」）及它們正式授權之服務供應商、僱員、主任、董事及代理及本計劃之核數師使用及處理，及在銀聯信託或其任何服務供應商認為有需要時，或被使用、披露及 / 或轉移（在香港境內或境外）予個別人士，包括政府機關及監管機構作以下列任何之目的：（一）行使或執行強制性公積金計劃條例（「條例」）下所授予或施加之職能或根據該條例的目的而行使或執行職能；（二）提供強制性公積金及本計劃的服務包括處理、掌管、管理及分析供款、累算權益及投資組合，視乎情況而定，及直銷強制性公積金服務；（三）改善銀聯信託提供予客戶一般之強制性公積金服務（包括協助提供強制性公積金服務以令銀聯信託之客戶可經例如互聯網處理強制性公積金(或其他)戶口資料）；（四）遵守適用之法律及規例及法院命令及 / 或（五）任何以行使或執行上述職能作目的之用途。如所提供資料有所變更，應在可行的情況下儘快通知銀聯信託。未能提供所需資料可能導致銀聯信託不能處理有關指示。於成員及參與僱主停止參與本計劃後，受託人仍可保留上述所有資料。</p> <p>成員及參與僱主有權要求查閱或更改任何個人資料或要求個人資料不被用作直銷之用。可以書面聯絡銀聯信託之資料保護主任，香港皇后大道中 183 號中遠大廈 18 樓。根據個人資料(私隱)條例，成員及參與僱主有權在支付費用的情況下，索取一份有關成員及參與僱主的資料副本。</p> |  |  |  |               |  |   |  |                         |  |

\* Delete as appropriate 請刪去不適用者

**PART V. AUTHORISATION AND DECLARATION 授權及聲明**

- (1) I / We understand and agree to the terms of the Personal Information Collection Statement as set out in this form.
- (2) I / We undertake that if there is any change in the information so provided, I / we shall notify Bank Consortium Trust Company Limited and oOo Securities (HK) Group Limited as soon as reasonably practicable.
- (3) I / We declare that to the best of my / our knowledge and belief, the information given in this form and / or its attachment(s), if any, is correct and complete.
- (1) 本人 / 吾等明白及同意於此表格之收集個人資料聲明條款。
- (2) 本人 / 吾等承諾若所提供之資料有任何更改，將儘快通知銀聯信託及奧翔驚集團(香港)證券有限公司。
- (3) 本人 / 吾等聲明，盡本人 / 吾等所知及所信，本表格及隨附之文件 (如有) 所提供的資料均屬正確無訛且無缺漏。



\_\_\_\_\_  
Authorised Signature(s) with Company Stamp  
有效簽署及公司印章

\_\_\_\_\_  
Date (D / M / Y)  
日期 (日 / 月 / 年)

**Internal Use Only 內部專用**

Date Received:

Input By:

Verified By:

Remarks: