

[Applicable to individual members]

Bank Consortium Trust Company Limited  
18/F, Cosco Tower,  
183 Queen's Road Central,  
Hong Kong

Dear Sir/Madam

**Appointment of Exclusive MPF Intermediary / Servicing Agent**

I, \_\_\_\_\_ [Name of **member**] holder of Hong Kong Identity Card number / Passport number (\_\_\_\_\_), have on the signing date below, appointed \_\_\_\_\_ [Name of **Principal Intermediary**] (“Principal Intermediary”) as my exclusive MPF Intermediary / servicing agent with respect to my MPF scheme arrangement.

I hereby direct and authorize Bank Consortium Trust Company Limited (“BCT”) to disclose and transfer my personal data and details of transactions/dealings of my BCT MPF account(s) as indicated below to the Principal Intermediary and their MPF subsidiary intermediaries and /or the relevant staff members for the purpose of their reviewing the dealing/transaction details of my account(s) with a view to providing all assistance necessary to ensure that I am able to participate effectively in the operation of the scheme of which I am a member.

Please tick the appropriate boxes  below to indicate the specific scheme(s) and account(s) that you direct and authorize BCT to disclose and transfer the above mentioned information to the Principal Intermediary.

Scheme	MPF Account(s)		
<input type="checkbox"/> BCT (MPF) Pro Choice	<input type="checkbox"/> Regular Employee	<input type="checkbox"/> Self-employed Person	<input type="checkbox"/> Personal account
	<input type="checkbox"/> Tax Deductible Voluntary Contribution (TVC)	<input type="checkbox"/> Special Voluntary Contribution (SVC)	
<input type="checkbox"/> BCT (MPF) Industry Choice	<input type="checkbox"/> Regular Employee	<input type="checkbox"/> Self-employed Person	<input type="checkbox"/> Personal account
	<input type="checkbox"/> Tax Deductible Voluntary Contribution (TVC)	<input type="checkbox"/> Special Voluntary Contribution (SVC)	

Yours faithfully,

\_\_\_\_\_  
Signature of the member

\_\_\_\_\_  
Date signed

To be completed by MPF Intermediary	
Broker Code:	Agent Name:
Region/District/Agency code:	Agent Code:

[適用於個人成員]

銀聯信託有限公司

香港皇后大道中 183 號

中遠大廈 18 樓

敬啟者：

**唯一強積金中介人 / 服務代理人委任書**

本人， \_\_\_\_\_ [ 個人成員姓名 ] (香港身份證號碼 / 護照號碼 \_\_\_\_\_ )於以下簽署日期起委任 \_\_\_\_\_

[ 主事中介人名稱 ] (「 主事中介人」)為處理本人強積金計劃事宜之唯一強積金中介人 / 服務代理人。

本人在此指示並授權予銀聯信託有限公司向 主事中介人 及其 強積金附屬中介人 及/或 有關僱員 披露及轉移本人的個人資料及有關本人於下方所示的帳戶內之買賣/交易詳情，用作提供本人參與以下 BCT 強積金計劃 / 帳戶所需的協助，以確保本人作為成員，能有效參與該等強積金計劃的運作。

請於下列空格  勾選閣下指示並授權銀聯信託有限公司披露及轉移上述資料予主事中介人的強積金計劃及帳戶：

計劃：	強積金帳戶：		
<input type="checkbox"/> BCT 積金之選	<input type="checkbox"/> 一般僱員	<input type="checkbox"/> 自僱人仕	<input type="checkbox"/> 個人帳戶
	<input type="checkbox"/> 可扣稅自願性供款 (TVC)	<input type="checkbox"/> 特別自願性供款 (SVC)	
<input type="checkbox"/> BCT (強積金) 行業計劃	<input type="checkbox"/> 一般僱員	<input type="checkbox"/> 自僱人仕	<input type="checkbox"/> 個人帳戶
	<input type="checkbox"/> 可扣稅自願性供款 (TVC)	<input type="checkbox"/> 特別自願性供款 (SVC)	

此致

\_\_\_\_\_  
個人成員簽署

\_\_\_\_\_  
日期

To be completed by MPF Intermediary	
Broker Code:	Agent Name:
Region/District/Agency code:	Agent Code: