

To 致: HSBC Provident Fund Trustee (Hong Kong) Limited
c/o The Hongkong and Shanghai Banking Corporation Limited 香港上海滙豐銀行有限公司
PO Box 73770 Kowloon Central Post Office 九龍中央郵政信箱73770號
or 或
Place into the MPF drop-in box at designated HSBC branches
投放於指定滙豐分行的強積金寄存辦理箱
HSBC MPF Employer Hotline 滙豐強積金僱主熱線: 2583 8033



**HSBC MANDATORY PROVIDENT FUND
NOTICE OF SCHEME TERMINATION (EMPLOYER)
滙豐強積金：終止計劃通知書（僱主）**

INOT

Note 注意：

- Please complete in CAPITAL and BLOCK LETTERS and tick ✓ the appropriate box(es). 請用大楷及正楷填寫，並於適當的方格內加上「✓」號。
- The information provided will be used in accordance with the Mandatory Provident Fund Schemes Ordinance and/or its Regulations and the same manner as mentioned in the "Personal Information Collection Statement for HSBC Mandatory Provident Fund" ("PICS"). The PICS can be obtained through HSBC MPF website www.hsbc.com.hk/mpf or MPF hotline 2583 8033 (Employer) or 3128 0128 (Member). By signing this form, your present choice of receiving direct marketing information will remain unchanged. If you wish to update the use of your personal data for direct marketing purpose as stated in the PICS from the HSBC MPF scheme, you may exercise your right by notifying us. 所有已提供的資料將按照《強制性公積金計劃條例》及／或其規例及《滙豐強積金的收集個人資料聲明》（「聲明」）處理。該聲明可透過以下滙豐強積金網站www.hsbc.com.hk/mpf或強積金熱線 2583 8033（僱主）或 3128 0128（成員）索取。在簽署本表格後，你現時關於接收直接促銷資訊的選擇將維持不變。如你希望更新在滙豐強積金計劃聲明中使用你的個人資料作直接促銷的用途，你可通知我們行使你的選擇權。

A. Details of Scheme 計劃資料

1. Employer ID 僱主編號	2. Scheme name 計劃名稱
3. Name of participating employer 參與僱主名稱	

B. Scheme Termination Details 計劃終止詳情

We would like to terminate the Scheme and cease contribution to the Scheme with the details provided as follows 我們現終止以上計劃及停止供款，詳情如下：

(1) **Scheme Termination Effective Date 終止計劃生效日期** / /
Year 年 Month 月 Day 日

(2) **Scheme Termination Reason as follows 原因如下 (Please tick the appropriate box 請在適當方格填上剔號):**

(i) Winding-up the business/No Eligible Employee 公司結業／沒有合資格僱員
(If an Employer terminates its participation in a MPF scheme indicated in Section A above because of winding-up of its business, please report the termination of member(s)' employment via Remittance Statement or provide a completed 'Remittance Statement – Employee Termination Information (Employer) (INZ3)' for termination of member(s)' employment, if applicable. 如僱主因公司結業而終止參與A部所指的強積金計劃，請僱主透過付款結算書或提供已填妥的「付款結算書 – 離職僱員資料（僱主）(INZ3)」以辦理成員離職手續，如適用。)

(ii) Scheme Transfer 計劃轉移
(Please provide a completed 'Employer's Request for Fund Transfer Form (INPE)' 請提供已填妥的「僱主資金轉移申請表 (INPE)」)

(3) **Contact Information After Scheme Termination Effective Date 終止計劃生效日期後的聯絡資料 (Please tick the appropriate box 請在適當方格填上剔號):**

(i) Remain unchanged 保持不變

(ii) Changed 已變更 (please provide a completed 'Change of Employer Details Form (IN05) 請提供已填妥的「更改僱主資料表格 (IN05)」)

Reminder 提示：

Refund of Contribution Arrangement 供款退款安排

If there is remaining balance in the employer contribution account, the remaining balance will be refunded by cheque. Please be reminded to present all cheque(s) before closure of your bank account under the above name of participating employer. 如僱主供款賬戶內尚有餘額，餘額將以支票退還。請注意，在取消貴公司的銀行賬戶前請存入所有我們寄出的支票。

C. Declaration and Authorisation 聲明及授權書

I have read and understood the full details of this form (including the Notes on this form) and agree to abide by the rules stated herein. 本人已細閱及明白此表格內的所有內容(包括此表格上的注意部分)，並同意遵守此述的規則。

Signature* 簽署*	Date 日期
x	

* This signature must be the same as your previous specimen submitted to us. Otherwise, this form may not be processed. 此簽名須與你之前遞交予我們的式樣相同，否則本表格可能不獲處理。