

Appendix for Ultimate Beneficiary

最終受益人附錄

(FOR INDIVIDUAL/JOINT/SOLE PROPRIETOR/CORPORATION)

適用於 個人 / 聯名 / 獨資 / 公司 戶口

FOR OFFICE USE ONLY 本公司專用	
Account No. 帳號	
Date Opened 開戶日期	

Individual or Joint Account 個人或聯名戶口			
Beneficiary 受益人#1		Beneficiary 受益人#2 (For Joint Applicant 適用於聯名申請)	
中文姓名*	English Name *	中文姓名*	English Name*
H.K.I.D. Card / Passport No. 香港身份證號碼 / 護照號碼*		H.K.I.D. Card / Passport No. 香港身份證號碼 / 護照號碼*	
Residential Address 住宅地址*		Residential Address 住宅地址*	
Correspondence Address 通訊地址 (Please state if differ from above 如與上述有異請註明)		Correspondence Address 通訊地址 (Please state if differ from above 如與上述有異請註明)	
Home Phone No. 住宅電話	Mobile Phone No. 手提電話*	Home Phone No. 住宅電話	Mobile Phone No. 手提電話*
E-mail Address 電郵地址*		E-mail Address 電郵地址*	
Type of Occupation 職業類別	Position 職位	Type of Occupation 職業類別	Position 職位
Name of Employer 僱主名稱	Number of years for the above occupation 從事上述職業年期	Name of Employer 僱主名稱	Number of years for the above occupation 從事上述職業年期

* 必須填寫 Must fill in

Signature 簽署

Beneficiary 受益人 # 1

with Company Chop where applicable
連同公司印章(如適用)

Beneficiary 受益人 # 2

with Company Chop where applicable
連同公司印章(如適用)

Date 日期 :
