



Client Name 客户名称	Account Number 账户号码
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I/We hereby appoint the following authorized person become effective immediately to operate my/our account of your company on my/our behalf and the coverage of the authorization includes:
本人/吾等现授权以下获授权人士，由即日起代表本人/吾等处理在 贵公司开立之账户及相关事宜：

Add 新增 Change 更改

Information of Authorized Person 获授权人资料	
Title 称谓	<input type="checkbox"/> Mr. 先生 <input type="checkbox"/> Mrs. 夫人/太太 <input type="checkbox"/> Ms. 女士 <input type="checkbox"/> Miss 女士
Name in English 英文姓名	
Name in Chinese 中文姓名	
* ID/Passport/BR No. * 身份证/护照/商业登记号码	Relationship with client 与授权人之关系
Contact Phone No. 联络电话号码	Country Code 国家编码 Area Code 区域编码 Phone Number 电话号码
E-mail Address(es) 电邮地址	
** Residence Address ** 居住地址	
Reason of authorization 授权原因	
Registered with the Hong Kong Securities and Futures Commission? 是否香港证券及期货事务监察委员会注册人士?	<input type="checkbox"/> NO 否 <input type="checkbox"/> YES 是 SFC CE No. _____
Coverage of Authorization 授权之范围	
<input type="checkbox"/> Dealing of Securities 证券交易	<input type="checkbox"/> Foreign Exchange 货币转换
<input type="checkbox"/> Corporate Actions 企业行动	<input type="checkbox"/> Others (please specify) 其他 (请注明) _____
Authorized Person's Signature 获授权人签署式样 X	

* please provide Copy of ID/Passport of the authorized person 请提供获授权人之身份证/护照副本
** please provide copy of Address Proof of the authorized person 请提供获授权人之地址证明副本

I/We understand 本人/吾等同时明白：

- The above authorization is valid for one year since the date of this document being signed.
此安排可申请最长有效期为签署本文件日起计一年时间。
- I may not be able to detect any abnormalities and mistakes in my account with this authorization. I hereby declare that I am responsible for all transactions, loss, cost and expenses due to the authorization and undertake all risks of manipulation of account and inappropriate dealings.
本人/吾等将可能因上述之授权而未能实时察觉账户内任何差异或错误而引致损失或责任，本人/吾等就此同意承担该等情况下所产生的任何风险及责任。
- You can amend or terminate the above authorization without my consent or giving any notification. However, I/we can also terminate the above authorization any time by tendering 7 business days written notice to your company.
贵公司可无须向本人/吾等发出通知或事先取得本人/吾等同意，而对上述安排作出任何变更或撤销。但是，本人/吾等亦有权向 贵公司发出七个营业日的通知而撤销本项安排。

Signature 签署

Signature of Account Main Holder 账户主要持有者签署 X	Signature of Account Second Holder (if applicable) 账户第二持有人签署 (如适用) X
Date 日期	Date 日期

For Witness Use 供见证人使用

Signature of Witness **X**
见证人签署

Name of Witness 见证人姓名： _____
Date 日期： _____

FOR OFFICE USE ONLY

Process Date : _____ Received Date : _____

Remark				
Signature Verified by	F.O. Checker	B.O. Maker	B.O. Checker	R.O.