

FORM TC(A)

**MANDATORY PROVIDENT FUND SCHEMES ORDINANCE (CAP 485)
(the Ordinance)**

**APPLICATION FOR APPROVAL AS TRUSTEE
(INFORMATION RELATING TO ADMINISTRATOR)**

NOTES:

- (1) *All questions must be answered. If any question is not applicable, please write "N.A."*
- (2) ** means delete whichever is inappropriate.*

FOR OFFICIAL USE ONLY

Application no.: _____ **Date application received:** _____

Subject officer: _____ **Input officer:** _____

SECTION I - PARTICULARS OF THE ADMINISTRATOR

- (1) Name of the administrator:

- (2) Place of incorporation: (please attach a copy of certificate of incorporation/registration)

- (3) Address where the principal business is carried out in Hong Kong:

Flat/Room	Floor	Block	Name of building
Street no.		Name of street	
Name of district			<i>Hong Kong/Kowloon/New Territories*</i>

Telephone no.: _____ Fax no.: _____

SECTION II - BUSINESS ACTIVITIES

(please use separate sheet if necessary)

- (1) If the day to day business activities will not be conducted wholly in Hong Kong, where they will be conducted and how these activities will be supervised by the Hong Kong office? Who is responsible, i.e. name and particulars of the person, for supervising and controlling these business activities?
- (2) What arrangements will be made with regard to the keeping of books of account and other records in respect of the Mandatory Provident Fund (MPF) schemes business. To what extent the company considers that it is able to meet the auditing requirements under the Ordinance? What records will be kept in Hong Kong?
- (3) A description of the computer system of the company for carrying out MPF business. State the main functions of the system and where it is physically located. State also whether the software of the system is tailor-made or standard package with or without modifications.

SECTION III - DECLARATION

We certify that we have read the Notes on Personal Information Collection and understand our rights and obligations in relation to the supply of personal data to the Authority and the manner in which the Authority may use or deal with the data.

We declare that to the best of our knowledge and belief, the information given in this Form is correct and complete. ✦

We certify that the documents attached to this Form are true and correct copies.

We undertake to notify the Authority of any matter which affects the validity of any information given in support of our application.

After the application is approved, we undertake to notify the Authority of any material changes to, or affecting the completeness or accuracy of, the information provided in this Form and any documents in relation to the application as soon as possible.

Name of the administrator:

Signature and company chop
(to be signed by two directors):

Name of persons signing:

Title or position of persons signing:

Date:

✦ **Warning:** Section 43E of the Ordinance makes it an offence punishable with a maximum of one year's imprisonment and a fine of \$100,000 on the first occasion and two years' imprisonment and a fine of \$200,000 on each subsequent occasion for a person who makes a statement that the person knows to be false or misleading in a material respect, or recklessly makes a statement which is false or misleading in a material respect.

Name and telephone no. of the contact person for the Authority's enquiries in connection with this application:

Name:

Telephone no.:
