

**FORM PF(CAN)**

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

**APPLICATION FOR CANCELLATION OF APPROVAL OF  
POOLED INVESTMENT FUND**

*Section 6 of the Mandatory Provident Fund Schemes (General) Regulation (Cap 485A)*

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**NOTES:**

- (1) *The applicant making an application for cancellation of approval of a pooled investment fund under section 6 of the Mandatory Provident Fund Schemes (General) Regulation should refer to the Guidelines on Application for Cancellation of Approval of Pooled Investment Funds.*
  - (2) *All questions must be answered. If any question is not applicable, please write "N.A."*
  - (3) *If boxes are provided, please tick whichever is appropriate.*
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**FOR OFFICIAL USE ONLY**

**Date of application received:** \_\_\_\_\_

**Date of letter of Acknowledgement:** \_\_\_\_\_

**Subject officer:** \_\_\_\_\_

**Input officer:** \_\_\_\_\_

**SECTION I - THE POOLED INVESTMENT FUND (PIF)**

- (1) Name of the PIF: \_\_\_\_\_
- (2) Approval number of the PIF: \_\_\_\_\_
- (3) Approval date of the PIF: \_\_\_\_\_
- (4) Name of the umbrella fund of the PIF (if applicable): \_\_\_\_\_
- (5) Was the PIF launched? Yes  No
- (6) If the answer to (5) is “Yes”, please state the launch date: \_\_\_\_\_
- (7) Please provide a breakdown of the assets of the PIF as of the date of this application:
- (i) MPF assets: HK\$ \_\_\_\_\_
- (ii) Non-MPF assets: HK\$ \_\_\_\_\_
- (8) Please provide a breakdown of the number of investors (i.e. unitholders or policyholders of PIF in the form of unit trust or insurance policy respectively) investing in the PIF as of the date of this application:
- (i) MPF investors: \_\_\_\_\_
- (ii) Non-MPF investors: \_\_\_\_\_

**SECTION II - BACKGROUND OF THE APPLICATION**

- (1) Proposed effective date of the cancellation of approval of the PIF: \_\_\_\_\_
- (2) Reason(s) for applying for cancellation of approval of the PIF:
- (a) Fund never launched
- (b) Fund to be terminated
- Proposed effective date of PIF termination: \_\_\_\_\_
- (c) Others, please specify:
- \_\_\_\_\_
- \_\_\_\_\_

**SECTION III - DECLARATION**

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

We undertake to notify the Mandatory Provident Fund Schemes Authority (the Authority) of any matter which affects the validity of any information given in support of this 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. We understand that the approval granted to the application may be withdrawn or varied by the Authority as it deems appropriate after considering such information.

Name of applicant:

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Signature and company chop (if any):

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Name of persons signing:

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Title or position of persons signing:

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Date:

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† **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:

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Telephone no.:

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