



OCCUPATIONAL RETIREMENT SCHEMES ORDINANCE

For continuation of item (3) of Section III of the application form for additional entries of relevant employers (see note 3)

**Supplementary Form 2A
which shall form part of
the Application Form ORS-2**

(1) Name of the Scheme (in English): _____

(in Chinese): _____

(2) Particulars of the relevant employer:

(a) Name (in English): _____

For official use						
Code						

(in Chinese) : _____

(b) Please tick the appropriate box below (see note 12):

- Registered office in Hong Kong *(please provide copy of Certificate of Incorporation and Business Registration Certificate)*
- Principal place of business in Hong Kong *(please provide copy of Certificate of Registration and Business Registration Certificate)*
- Business address *(please provide copy of Business Registration Certificate)*

Address (in English):

Flat/Room	Floor	Block	Name of building

Street no.	Name of street

Name of district/city/province	Area code/Postal code

Name of country

(c) Telephone no.: _____ Fax no. : _____

(d) Email address: _____

(e) Business registration no. in Hong Kong, if any: _____

(f) Number of scheme members of the relevant employer

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NOTE : This supplementary form can be photocopied for further entries if necessary.