



OCCUPATIONAL RETIREMENT SCHEMES ORDINANCE

For continuation of item (3) of Section V of the application form for additional entries of relevant employers (see note 4)

**Supplementary Form 3A
which shall form part of
the Application Form ORS -3**

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

(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 10):

- 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 : _____

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