



強制性公積金計劃管理局
MANDATORY PROVIDENT FUND
SCHEMES AUTHORITY

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本局檔號 Our Ref. : MPFA/E/MP/96/8

來函檔號 Your Ref.:

10 February 2003

Circular Letter: EF/CTR/2003/001

To: All approved trustees of registered MPF schemes

Dear Sirs

Reports Relating to Payment of Mandatory Contributions

The enacted Mandatory Provident Fund Schemes (Amendment) (No.2) Ordinance was gazetted on 19 July 2002. In August 2002, the Authority revised Guidelines IV.2 on reports relating to payment of mandatory contributions. The revised Guidelines have been promulgated and have become effective on 1 February 2003.

Electronic Interface Requirements

As set out in Guidelines IV.2, all approved trustees are required to comply with the requirements for electronic interface in the submission of Default Contribution, Persistent Late Payment and other reports.

This letter serves to summarise the relevant electronic interface requirements which have been distributed to trustees earlier, to take effect from 1 February 2003. Details are attached in the Annex. The circular letter on the current reporting requirements issued on 8 November 2000 is hereby superseded.

Should you have any queries, please contact your case officer.

Yours sincerely

(E S W Lee)
Executive Director
(Enforcement Division)

Encl.

MANDATORY PROVIDENT FUND SCHEMES AUTHORITY
Notification of Default Contribution, Discrepancies,
Persistent Late Payment and Outstanding Surcharge

Requirements for Electronic Interface

The Authority hereby specifies the electronic interface requirements relating to submission of the Default Contribution Report and Persistent Late Payment Report in the following paragraphs.

A. General Information/Requirements

Media

The Authority will only accept report files transmitted through the CHS Network or alternatively in the form of 1.44MB diskettes with size of 3.5 inches in MS-DOS format not exceeding one diskette's storage capacity or CD-ROM 650 MB in ISO 9660 format.

Diskette/CD-ROM Labelling

Approved trustee should label the diskette containing the Default Contribution Report files, Discrepancies Report files, Persistent Late Payment Report files and Outstanding Surcharge Report files with the relevant scheme registration number and the relevant date of submission. If there is more than one diskette submitted at a time, approved trustee should number the diskettes in series. To illustrate, the format should take the form "MT12345-20030422-01" ("MT12345" being the scheme registration number, "20030422" being the relevant year, month and day of file submission and "01" being the first diskette submitted). In case there are second and third diskettes submitted, they should be numbered as "MT12345-20030422-02" and "MT12345-20030422-03" respectively.

Information to be Submitted

Approved trustee should enclose a covering letter with the relevant reports on default contribution, discrepancies, persistent late payment and outstanding

surcharge cases submitted either through CHS Network or by means of diskette/CD-ROM. The covering letter should specify the following information for verification by the Authority.

- Type of files
- Name of diskette / CD-ROM Label (if not by CHS Network)
- File Name
- Contribution Period
- Report Type (i.e. 1st, 2nd or 3rd)
- Number of employers
- Number of self-employed persons
- Number of records in each file
- Total sum of amount in arrears in Default Contribution Report file, Discrepancies Report file or Outstanding Surcharge Report file
- Total sum of amount of mandatory contributions concerned with the contribution day in Persistent Late Payment Report file

For details, please refer to the attached sample covering letter.

Duplicate Records

The trustee should ensure that no duplicate records are included in the files submitted.

Records to be Excluded

Please do not report the following records to the Authority.

- (i) Employers who have not enrolled any employee in your scheme
- (ii) Employers or self-employed persons who have terminated your services

If your system does not allow for the exclusion of the above-mentioned employers/self-employed persons, we should be grateful if you would file them separately and add a remark in their records for identification purpose.

B. Naming of File

Each file should be named according to the type of records it carries, as follows:

Type of Records	File Name
Report of Default Contribution	<p><u>Employer</u> [Scheme Registration Number]DC[YYYYMMDD]-01 e.g. MT12345DC20030422-01</p> <p><u>Self-employed Person</u> [Scheme Registration Number]SD[YYYYMMDD]-01 e.g. MT12345SD20030422-01</p>
Report of Discrepancies	<p><u>Employer</u> [Scheme Registration Number]DP[YYYYMMDD]-01 e.g. MT12345DP20030422-01</p> <p><u>Self-employed Person</u> [Scheme Registration Number]SP[YYYYMMDD]-01 e.g. MT12345SP20030422-01</p>
Report of Persistent Late Payment	<p><u>Employer</u> [Scheme Registration Number]PL[YYYYMMDD]-01 e.g. MT12345PL20030422-01</p> <p><u>Self-employed Person</u> Not applicable</p>
Report of Outstanding Surcharge	<p><u>Employer</u> [Scheme Registration Number]SU[YYYYMMDD]-01 e.g. MT12345SU20030422-01</p> <p><u>Self-employed Person</u> [Scheme Registration Number]SS[YYYYMMDD]-01 e.g. MT12345SS20030422-01</p>

- ◆ Each text file should only carry records of the same type.
- ◆ Number of records of each text file must not be more than 20,000.
- ◆ For records of the same type which span more than one file, please differentiate between the files using the two-digit sequence number at the end of the file name (e.g. if there are 2 files for same type of records, please indicate the first file as [Scheme Registration Number]DC[YearMonthDay]-01, and the second file as [Scheme RegistrationNumber]DC[YearMonthDay]-02). If there is only one file for a type of record, “01” should be used as the sequence number in the file name.
- ◆ The extension of the file should be “TXT” (A sample file name of a Default Contribution Report should be like MT12345DC20030422-01.TXT).

C. Format of File

- ◆ All report files submitted must be plain text files in ASCII format. Report files in Word, Excel or other format will be rejected.
- ◆ The reports should follow the fixed-length column formats. Space, not tab space, should be inserted to the columns in which no information is needed to be reported or the required information is not available.
- ◆ Each record should start with a new line.
- ◆ Chinese character must be stored in “Big 5” format.
- ◆ The set of characters to be used is restricted to those coded in the “Big-5” standard and included in the Hong Kong Supplementary Character Set (HKSCS).
- ◆ For each file to be submitted, the column sequence and column length must follow the following defined format:

1. Report of Default Contribution , Discrepancies or Outstanding Surcharge for Employer and Self-employed Person

Column Name	Format	Mandatory Field *	Remark
Date of report	8 characters	✓	DDMMYYYY (e.g. 22042003)
Scheme registration number	15 characters	✓	e.g. MT12345
Approval number of trustee	15 characters	✓	
English name of the defaulter (employer/self-employed person)	130 characters	✓	Provide both English and Chinese names (the next field) of the defaulter, if available. Otherwise, provide either English or Chinese name of the defaulter.
Chinese name of the defaulter (employer/self-employed person)	50 Chinese characters	✓	Provide both Chinese and English names (the previous field) of the defaulter, if available. Otherwise, provide either English or Chinese name of the defaulter.
Participation number	15 characters	✓	For employer only. Participation number refers to the number as appears on the participation certificate.
HKID/Passport number	15 characters	✓	For self-employed person only. Provide either HKID or Passport number, not both.
Address line 1 of the defaulter	50 characters	✓	
Address line 2 of the defaulter	50 characters		
Address line 3 of the defaulter	50 characters		
Address line 4 of the defaulter	50 characters		
Address line 5 of the defaulter	50 characters		
Phone number regional code of the defaulter	3 characters		

Column Name	Format	Mandatory Field *	Remark
Phone number area code of the defaulter	7 characters		
Phone number of the defaulter	15 characters		
Fax number regional code of the defaulter	3 characters		
Fax number area code of the defaulter	7 characters		
Fax number of the defaulter	15 characters		
Contribution period concerned (Start)	8 characters	✓	DDMMYYYY
Contribution period concerned (End)	8 characters	✓	DDMMYYYY
Contribution day concerned	8 characters	✓	DDMMYYYY
Amount in arrears (HKD)	16 characters	✓	99999999999999.99 (Must be greater than zero)
Number of employee concerned	7 characters	✓	9999999 (Must be greater than zero). Please input "1" for cases in relation to self-employed person.
Remarks	500 characters		
Number of report	1 character	✓	<u>For contribution period ended before 1 Feb 2003</u> Identification of the report i.e. - "1" for 1 st Report - "2" for 2 nd Report - "3" for 3 rd Report <u>For contribution period ended on or after 1 Feb 2003</u> Identification of the report i.e. - "1" for 1 st Report - "2" for 2 nd Report

* There must be inputs for the Mandatory Fields .

2. Report of Persistent Late Payment for Employer

Column Name	Format	Mandatory Field *	Remark
Date of report	8 characters	✓	DDMMYYYY
Scheme registration number	15 characters	✓	e.g. MT12345
Approval number of trustee	15 characters	✓	
English name of persistent late payer	130 characters	✓	Provide both English and Chinese names (the next field) of the persistent late payer, if available. Otherwise, provide either English or Chinese name of the persistent late payer.
Chinese name of the persistent late payer	50 Chinese characters	✓	Provide both Chinese and English name (the previous field) of the persistent late payer, if available. Otherwise, provide either English or Chinese name of the persistent late payer.
Participation number	15 characters	✓	For employer only. Participation number refers to the number as appears on the participation certificate.
Address line 1 of the persistent late payer	50 characters	✓	
Address line 2 of the persistent late payer	50 characters		
Address line 3 of the persistent late payer	50 characters		
Address line 4 of the persistent late payer	50 characters		
Address line 5 of the persistent late payer	50 characters		
Phone number regional code of the persistent late payer	3 characters		
Phone number area code of the persistent late payer	7 characters		
Phone number of the persistent late payer	15 characters		

Column Name	Format	Mandatory Field *	Remark
Fax number regional code of the persistent late payer	3 characters		
Fax number area code of the persistent late payer	7 characters		
Fax number of the persistent late payer	15 characters		
1 st Late payment contribution day	8 characters	✓	DDMMYYYY
1 st Late payment contribution day #	8 characters	✓	DDMMYYYY
2 nd Late payment contribution day	8 characters	✓	DDMMYYYY
2 nd Late payment contribution day #	8 characters	✓	DDMMYYYY
3 rd Late payment contribution day	8 characters	✓	DDMMYYYY
3 rd Late payment contribution day #	8 characters	✓	DDMMYYYY
4 th Late payment contribution day	8 characters	✓	DDMMYYYY
4 th Late payment contribution day #	8 characters	✓	DDMMYYYY
Amount of mandatory contributions for the 1 st late payment after contribution day (HKD)	16 characters	✓	99999999999999.99 (Must be greater than zero)
Amount of mandatory contributions for the 2 nd late payment after contribution day (HKD)	16 characters	✓	99999999999999.99 (Must be greater than zero)
Amount of mandatory contributions for the 3 rd late payment after contribution day (HKD)	16 characters	✓	99999999999999.99 (Must be greater than zero)

Column Name	Format	Mandatory Field *	Remark
Amount of mandatory contributions for the 4 th late payment after contribution day (HKD)	16 characters	✓	99999999999999.99 (Must be greater than zero)

* There must be inputs for the Mandatory Fields .

Duplicate columns

SAMPLE COVERING LETTER

General information:

Trustee : Good Example Trustee Company
 Scheme number : MT12345
 Scheme name : XYZ MPF Scheme
 Date of submission : 18 July 2003
 Number of CD-ROM submitted¹ : 1
 Number of floppy diskettes submitted¹ : 1

Summary of submitted diskettes/CD-ROM/files:

(I) Reports on Employer

(i) Default Contibution

Diskette/CD-ROM Label	File Name ²	Contribution Period	Report Type	No. of ER	No. of Records	Total Sum of Amount Involved ³ (HKD)	Remarks
MT12345-20030718-01	MT12345DC20030718-01	May 2003	1 st	10,000	20,000	500,000.00	
MT12345-20030718-01	MT12345DC20030718-02	April 2003	2 nd	50	100	50,000.00	
Total:				10,050	20,100	550,000.00	

(ii) Discrepancies

MT12345-20030718-01	MT12345DP20030718-01	May 2003	1 st	5,000	10,000	100,000.00	
MT12345-20030718-01	MT12345DP20030718-02	April 2003	2 nd	100	200	2,000.00	
Total:				5,100	10,200	102,000.00	

(iii) Persistent Late Payment

MT12345-20030718-01	MT12345PL20030718-01	-	-	2,000	2,000	1 st	10,000.00	
						2 nd	10,000.00	
						3 rd	10,000.00	
						4 th	10,000.00	
Total:				2,000	2,000	40,000.00		

(iv) Outstanding Surcharge

MT12345-20030718-01	MT12345SU20030718-01	April 2003	1 st	100	200	2,000.00	
MT12345-20030718-01	MT12345SU20030718-02	April 2003	1 st	10	20	200.00	
Total:				110	220	2,200.00	

(II) Reports on Self-employed Person

(i) Default Contribution

Diskette/CD-ROM Label	File Name²	Contribution Period	Report Type	No. of SEP	No. of Records	Total Sum of Amount Involved³ (HKD)	Remarks
MT12345-20030718-02	MT12345SD20030718-01	May 2003	1 st	10,000	20,000	500,000.00	
MT12345-20030718-02	MT12345SD20030718-02	April 2003	2 nd	50	100	50,000.00	
Total:				10,050	20,100	550,000.00	

(ii) Discrepancies

MT12345-20030718-02	MT12345SP20030718-01	May 2003	1 st	5,000	10,000	100,000.00	
MT12345-20030718-02	MT12345SP20030718-02	April 2003	2 nd	100	200	2,000.00	
Total:				5,100	10,200	102,000.00	

(iii) Outstanding Surcharge

MT12345-20030718-02	MT12345SS20030718-01	May 2003	1 st	100	200	2,000.00	
MT12345-20030718-02	MT12345SS20030718-02	April 2003	1 st	10	20	200.00	
Total:				110	220	2,200.00	

Note:

¹ Not applicable to files transmitted to the Authority through CHS Network .

² SEP and ER reports should be saved in separate files.

³Total Sum of Amount Involved

(i) For default contribution, discrepancies and outstanding surcharge reports, "Total Sum of Amount Involved" means the amount in arrears.

(ii) For persistent late payment report, "Total Sum of Amount Involved" refers to the amounts of MC for the 1st to 4th late payments respectively.