

## **MANDATORY PROVIDENT FUND SCHEMES AUTHORITY**

### **IV.4 Guidelines on Payment of Accrued Benefits - Documents to be Submitted to Approved Trustees**

#### **INTRODUCTION**

In accordance with section 15 of the Mandatory Provident Fund Schemes Ordinance (“the Ordinance”), the accrued benefits of a scheme member may be withdrawn under the circumstances prescribed therein. Part XIII of the Mandatory Provident Fund Schemes (General) Regulation (“the Regulation”) further specifies the requirements and procedures regarding claims for payment of accrued benefits.

2. The Mandatory Provident Fund Schemes (Amendment) Bill 2002 was passed on 12 July 2002. The enacted Mandatory Provident Fund Schemes (Amendment) (No. 2) Ordinance 2002 (“the Amendment Ordinance”) was gazetted on 19 July 2002. Section 17 of the Schedule to the Amendment Ordinance, which has come into operation on 19 July 2002, provides for the conditions of claiming payment on ground of total incapacity by a scheme member who was, immediately before becoming totally incapacitated, unemployed or ceased to be a self-employed person.

3. Section 6H of the Ordinance provides that the Mandatory Provident Fund Schemes Authority (“the Authority”) shall issue guidelines for the guidance of approved trustees, service providers and other persons concerned with the Ordinance.

4. Section 47A of the Ordinance empowers the Authority to specify or approve the form and contents of documents required for the purposes of this Ordinance.

5. The Authority hereby issues guidelines relating to the processing of claims for payment of accrued benefits.

### **CLAIM FORM**

6. For the purposes of Division 1 of Part XIII of the Regulation, the Authority hereby approves :

- (a) at Annex A, the *Claim Form for Payment of Accrued Benefits* (“*the Claim Form*”) (*Form MPF(S)-W*);
- (b) at Annex B, the medical certificate (*Form MPF(S)-W(M)*); and
- (c) at Annexes C to F, the statutory declaration forms (*Form MPF(S)-W(SD1)*, *Form MPF(S)-W(SD2)*, *Form MPF(S)-W(SD3)* and *Form MPF(S)-W(SD4)*) to be used for the circumstances specified in the Regulation.

7. Lodgement of a claim for payment of accrued benefits must be made in these approved forms.

8. A claimant is only required to fill in one Claim Form if the claim is in respect of one or more accounts in one single registered scheme. However, if the claim is in respect of accounts in more than one registered scheme, the claimant is required to fill in one Claim Form for each registered scheme.

## EVIDENCE FOR CLAIMS

9. Under Part XIII of the Regulation, a claim for payment of accrued benefits must be accompanied by evidence satisfactory to the trustee that the claimant is eligible for the claim, or a relevant statutory declaration.

10. To facilitate trustees in processing claims for payment, Section III of the Claim Form sets out the documents that a claimant is required to submit in lodging the claim. In vetting those documents, trustees should take note of the following :

- (a) *Date of birth in Hong Kong Identity (HKID) Card* : If the HKID card of a claimant does not contain the exact date of birth of the claimant, the trustee may determine the age of the claimant by reference to the last day of the month or the last day of the year as shown on the HKID card in processing claims on grounds of retirement or early retirement. For instance, if the claimant is recorded as born in 1945, he/she will be entitled to be paid his/her accrued benefits starting from 31 December 2010, which is the 65th year after his/her birth.
- (b) *Documents to show the status of a personal representative of a deceased scheme member* : The name of the personal representative of a deceased person is printed on the Letter of Probate or Letter of Administration issued by the Probate Registry. The trustee of the scheme can verify the status of a personal representative by requesting a copy of the Letter of Probate or Letter of Administration from the personal representative.
- (c) *Medical certificate certifying total incapacity* : If the claimant also claims long service payment on grounds of permanent unfitness for his/her present job under the Employment Ordinance (Cap. 57),

he/she may use the form “Certificate of an employee’s permanent unfitness for a particular type of work” used for the purpose to substitute for the approved form for medical certificate, MPF(S) - W(M), at Annex B to claim for payment of MPF accrued benefits on grounds of total incapacity.

- (d) Forms of statutory declarations : To facilitate compliance by scheme members and trustees, forms are approved for making statutory declaration by claimants under different circumstances in claiming for payment of accrued benefits (Annexes C to F). Statutory declarations made in a place other than Hong Kong are also acceptable provided that they are made before and signed by a notary public or a registered solicitor.

11. In some special circumstances, when the above requirements do not seem appropriate, the trustees may alter the requirements to satisfy themselves that the claimant is eligible for the claim.

### **AVAILABILITY OF THE FORMS**

12. The Claim Form, Form MPF(S) - W(M) and the statutory declaration forms can be downloaded by any user from the internet at the Authority’s web site at [<http://www.mpfahk.org>]. Hard copies of the forms are also available at the office of the Authority. Approved trustees may consider allowing any user to download the forms from their web sites by putting the forms online or providing hard copies of the forms upon request. To facilitate smooth processing of the payment of accrued benefits, approved trustees may provide supplementary notes in addition to those in the explanatory notes of the Claim Form.

**FORM MPF(S) - W**

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

**CLAIM FORM FOR PAYMENT OF ACCRUED BENEFITS**

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*NOTES :*

- (1) *This Form is to be completed by any person who wishes to claim for payment of accrued benefits.*
  - (2) *Please use BLOCK LETTERS for completion of this Form.*
  - (3) *Please read the explanatory notes carefully before completing this Form.*
  - (4) *\* means delete whichever is inappropriate.*
  - (5) *Please insert "N.A." if not applicable.*
  - (6) *The information and data given in this Form can be used by the approved trustee concerned and the Mandatory Provident Fund Schemes Authority in activities relating to the processing of the claim and may be disclosed to other parties for such purposes.*
  - (7) *All the forms related to claims for payment of accrued benefits (i.e. Form MPF(S) - W(M), MPF(S) - W(SD1), MPF(S) - W(SD2), MPF(S)-W(SD3) and MPF(S) - W(SD4)) can be downloaded from the internet at MPFA's web site. Hard copies of the forms are also available at the office of the MPFA. If necessary, you may seek assistance from the approved trustee of your scheme or the MPFA.*
  - (8) *Upon completion of this Form, claimant / scheme member should give this Form to the approved trustee of the scheme concerned.*
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**SECTION I - DETAILS OF THE CLAIMANT / SCHEME MEMBER** <sup>Note 1</sup>**(1) Claimant**

(i) Name : \_\_\_\_\_

(ii) Hong Kong Identity (HKID)  
Card / Passport\* number <sup>Note 2</sup> : \_\_\_\_\_

(iii) Correspondence address

Flat/Room	Floor	Block	Name of building

Street no.	Name of street

	* <i>Hong Kong/Kowloon/N.T.</i>
Name of district	

(iv) (a) Telephone no. : \_\_\_\_\_

(b) Mobile/Pager no. : \_\_\_\_\_

(v) Facsimile no. : \_\_\_\_\_

**(2) Scheme member** (if different from claimant)

(i) Name : \_\_\_\_\_

(ii) Hong Kong Identity (HKID)  
Card / Passport\* number <sup>Note 2</sup> : \_\_\_\_\_

**SECTION II - DETAILS OF THE CLAIM**

(1) Name of the scheme and account number(s) against which payment(s) are claimed <sup>Note 3</sup>

Name of the scheme : \_\_\_\_\_

Name of the trustee : \_\_\_\_\_

Account number(s) : (1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(2) Grounds for claiming accrued benefits : *(please ✓ one box)*

- Retirement (i.e. scheme member reaches the retirement age of 65)
- Early retirement (i.e. scheme member reaches the age of 60 and has permanently ceased all employments / self-employment)
- Total incapacity
- Death
- Permanent departure from Hong Kong
- Small balance account

(3) Method of payment *(please ✓ the appropriate box)* :

(i) by cheque

(ii) by depositing directly in my bank account   
(applicable only to trustees who provide such services and charges may be imposed for the transaction)

Name of bank : \_\_\_\_\_

Account number : \_\_\_\_\_

**SECTION III - DOCUMENTS ENCLOSED**

The following documents are enclosed by the claimant(s) in respect of the claim for payment on grounds of *(Please ✓ the appropriate box)* <sup>Note 4</sup> :

**(A) Retirement**

- a copy of your HKID card for verification of your identity card number if you do not wish to present the card in person for verification <sup>Note 8</sup>

**(B) Early Retirement**

- a copy of your HKID card for verification of your identity card number if you do not wish to present the card in person for verification <sup>Note 8</sup>
- the original copy of the statutory declaration form on early retirement (Form MPF(S) - W(SD1) ) <sup>Note 5</sup>

**(C) Total Incapacity**

- a copy of your HKID card for verification of your identity card number if you do not wish to present the card in person for verification <sup>Note 8</sup>
- a photocopy of the medical certificate certifying total incapacity (Form MPF(S) - W(M)) <sup>Note 6</sup>
- a photocopy of the letter from the employer (if employed as an employee immediately before total incapacity) or the last employer (if employment as an employee has been terminated before total incapacitation) certifying that the contract of employment for that particular kind of work has been or will be terminated <sup>Note 7</sup>
- the original copy of the statutory declaration form on total incapacity <sup>Note 9</sup>

**(D) Death**

- a copy of your HKID card for verification of your identity card number if you do not wish to present the card in person for verification <sup>Note 8</sup>
- a photocopy of the death certificate of the deceased scheme member
- a photocopy of the Letter of Probate or Letter of Administration granted by the Probate Registry

**(E) Permanent Departure from Hong Kong**

- a copy of your HKID card for verification of your identity card number if you do not wish to present the card in person for verification <sup>Note 8</sup>
- a photocopy of the immigration visa / foreign passport / Home Visit Permit/Entry Permit for Hong Kong and Macau Residents <sup>Note 10</sup>/others \*, etc.  
\_\_\_\_\_ (please specify type of other documents) giving the member the right of abode in a place outside Hong Kong
- the original copy of the statutory declaration form on permanent departure (Form MPF(S) – W(SD2)) <sup>Note 5</sup>
- a photocopy of the Letter of Release issued by the Inland Revenue Department, if applicable



- your overseas contact details:

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Phone No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

(9) Small Balance Account

- a copy of your HKID card for verification of your identity card number if you do not wish to present the card in person for verification <sup>Note 8</sup>
- the original copy of the statutory declaration form on small balance account (Form MPF(S) – W(SD3)) <sup>Note 5</sup>

**SECTION IV – DECLARATION**

I / We\* <sup>Note 1</sup> declare that to the best of my / our \* knowledge and belief, the information given in this Form and its attachments is correct and complete. ✦

\_\_\_\_\_  
 [Signature of the claimant(s) / scheme member\*]

\_\_\_\_\_  
 Date

✦ **Warning** : Section 43E of the Ordinance makes it an offence punishable with a maximum of 1 year imprisonment for the first occasion and 2 years' imprisonment on each subsequent occasion for a person who makes a false or misleading statement in a material respect

***Explanatory Notes on  
Claim Form For Payment of Accrued Benefits (Form MPF(S) – W)***

- (1) For claims of payment on grounds of death, only the personal representative within the meaning of the Probate and Administration Ordinance (Cap.10) may act on behalf of the deceased scheme member to claim for payment of the member's accrued benefits. If there is more than one personal representative and the personal representatives have not authorized one of the representatives to act on behalf of other representatives to lodge the claim, all the personal representatives should submit the Claim Form jointly. Please use additional blank sheet to provide details of the claimants under Section I. Under such circumstances, this Form needs to be signed by all of the personal representatives.
- (2) Claimants or scheme members should give their passport numbers ONLY when they do NOT possess HKID cards.
- (3) If a claimant/scheme member has more than one account in a registered scheme, the claimant should fill in one form for payment of accrued benefits in respect of all accounts within one scheme. If a claimant/scheme member has accounts in more than one scheme, the claimant should fill in one form for each scheme.
- (4) In processing a claim of payment, the approved trustee of the scheme may request the claimant to produce the original copies of the documents for checking purpose, if necessary.
- (5) A claimant who is required to make a statutory declaration for a claim shall complete the relevant statutory declaration form and make a statutory declaration before a Commissioner for Oaths. The signed statutory declaration form shall be attached to Form MPF(S) – W. A statutory declaration made in a place other than Hong Kong is also acceptable provided that it is made before and signed by a notary public or a registered solicitor.
- (6) Except for a claimant who also claims long service payment on grounds of permanent unfitness for his/her present job under the Employment Ordinance (Cap. 57), a claimant shall ask his/her medical practitioner to fill in Form MPF(S) – W(M) and attach it to Form MPF(S) – W. A medical practitioner who signs Form MPF(S) – W(M) must be a person who is registered under the Medical Registration Ordinance, i.e.,
  - (a) a person who is duly registered as a medical practitioner with the Medical Council of Hong Kong, or
  - (b) a person who is deemed to be registered as a medical practitioner under the Medical Registration Ordinance (i.e. persons who are exempted from registration).

For a claimant who also claims long service payment on grounds of permanent unfitness for his/her present job, he/she may use the form "Certificate of an employee's permanent unfitness for a particular type of work" under the Employment Ordinance used for the purpose to substitute for the Form MPF(S) – W(M) for the purpose of

- claiming payment of MPF accrued benefits on grounds of total incapacity.
- (7) For a self-employed person or a former self-employed person who claims payment on grounds of total incapacity, there is no need to produce an employer letter.
  - (8) For claimant or scheme member who does NOT possess a HKID card, a copy of the passport (only for pages with personal particulars and passport number) should be given to the trustee concerned for verification of the passport number if the claimant or scheme member does not wish to present the passport in person for verification.
  - (9) For a former employee whose last employment has been terminated before total incapacity and who is unable to obtain a letter from the last employer certifying that that contract of employment for that particular kind of work has been terminated or has been unemployed for more than 7 years, he/she must provide the trustee with a statutory declaration stating that that contract of employment for the particular kind of work as specified in the medical certificate has been terminated.
  - (10) The “Entry Permit for Hong Kong and Macau Residents (港澳居民來往內地通行證)” is issued at the China Travel Service (Hong Kong) Limited on behalf of the Public Security Bureau of Guangdong, PRC.

**FORM MPF(S) - W(M)**

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

**CERTIFICATE OF A PERSON'S PERMANENT UNFITNESS  
FOR A PARTICULAR KIND OF WORK**

Name of the patient : \_\_\_\_\_ Sex : \_\_\_\_ Age : \_\_\_\_

Hong Kong Identity Card / Passport\* No. : \_\_\_\_\_

The above patient has been under the medical care of the undersigned since  
\_\_\_\_\_ [dd/mm/yyyy]

Based on the findings as revealed in today's consultation, I certify that he / she\* is permanently unfit for his / her\* present / last\* job as a \_\_\_\_\_ [job title] for the following reason(s) : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of registered medical practitioner : \_\_\_\_\_

Name in block letters : \_\_\_\_\_

Address and telephone number : \_\_\_\_\_

\_\_\_\_\_

Date : \_\_\_\_\_

Official seal (if any) : \_\_\_\_\_

*\* Delete whichever is inappropriate*

**FORM MPF(S) - W(SD1)**

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

**STATUTORY DECLARATION FOR CLAIMS FOR PAYMENT  
OF ACCRUED BENEFITS ON GROUNDS OF EARLY RETIREMENT**

I, \_\_\_\_\_ [name of the claimant], Hong Kong Identity Card / Passport\* No.:  
\_\_\_\_\_ of \_\_\_\_\_ [address of the claimant],  
solemnly and sincerely declare that :

- (a) I have reached 60 years old on \_\_\_\_\_ [dd/mm/yyyy]; and
- (b) I have permanently ceased my employment and / or self-employment\* with  
effect from \_\_\_\_\_ [dd/mm/yyyy].

And I make this solemn declaration conscientiously believing the same to be true and by  
virtue of the Oaths and Declarations Ordinance.

\_\_\_\_\_  
[Signature of the claimant]

Declared at \_\_\_\_\_, Hong Kong this \_\_\_\_\_ day  
of \_\_\_\_\_.

Before me,

\_\_\_\_\_  
[Signature of the Commissioner for Oaths]

*\* Delete whichever is inappropriate*

**FORM MPF(S) - W(SD2)**

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

**STATUTORY DECLARATION FOR CLAIMS FOR PAYMENT  
OF ACCRUED BENEFITS ON GROUNDS  
OF PERMANENT DEPARTURE FROM HONG KONG**

I, \_\_\_\_\_ [name of the claimant], Hong Kong Identity Card / Passport\*  
No.: \_\_\_\_\_ of \_\_\_\_\_ [address of the claimant],  
solemnly and sincerely declare that :

- (a) I departed / will depart\* from Hong Kong permanently  
on \_\_\_\_\_ [dd/mm/yyyy]; and
- (b) No mandatory contributions were paid or required to be paid by or in respect  
of me to any registered scheme under the Mandatory Provident Fund Schemes  
Ordinance since the date specified in (a) above; and
- (c) I have not previously claimed payment for any accrued benefit in any  
registered scheme on grounds of permanent departure from Hong Kong on an  
earlier departure date.

And I make this solemn declaration conscientiously believing the same to be true and by  
virtue of the Oaths and Declarations Ordinance.

\_\_\_\_\_  
[Signature of the claimant]

Declared at \_\_\_\_\_, Hong Kong this \_\_\_\_\_ day of \_\_\_\_\_.

Before me,

\_\_\_\_\_  
[Signature of the Commissioner for Oaths]

\* *Delete whichever is inappropriate*

**FORM MPF(S) - W(SD3)**

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

**STATUTORY DECLARATION FOR CLAIMS FOR PAYMENT  
OF ACCRUED BENEFITS FROM SMALL BALANCE ACCOUNTS**

I, \_\_\_\_\_ [name of the claimant], Hong Kong Identity Card / Passport\*  
No.: \_\_\_\_\_ of \_\_\_\_\_ [address of the claimant],  
solemnly and sincerely declare that :

- (a) I do not intend to become employed or self-employed within the foreseeable future; and
- (b) during the 12 months immediately preceding the lodgment of this claim, no mandatory contributions were paid or required to be paid by or in respect of me to any registered scheme under the Mandatory Provident Fund Schemes Ordinance; and
- (c) I do not have accrued benefits kept in any other registered scheme.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Ordinance.

\_\_\_\_\_  
[Signature of the claimant]

Declared at \_\_\_\_\_, Hong Kong this \_\_\_\_\_ day of \_\_\_\_\_.

Before me,

\_\_\_\_\_  
[Signature of the Commissioner for Oaths]

\* *Delete whichever is inappropriate*

**FORM MPF(S) - W(SD4)**

**MANDATORY PROVIDENT FUND SCHEMES ORDINANCE (CAP. 485)  
("the Ordinance")  
STATUTORY DECLARATION FOR CLAIMS FOR PAYMENT  
OF ACCRUED BENEFITS ON GROUNDS OF TOTAL INCAPACITY**

I, \_\_\_\_\_ [name of the claimant], Hong Kong Identity Card / Passport\* No.:  
\_\_\_\_\_ of \_\_\_\_\_ [address of the claimant],  
solemnly and sincerely declare that:

- (a) I was last engaged as a \_\_\_\_\_ [job title] before becoming totally incapacitated and that that contract of employment has been terminated with effect from \_\_\_\_\_ [dd/mm/yyyy]; and
- (b) I am unable to obtain a letter from my last employer certifying the termination of that contract of employment / I have been unemployed for more than 7 years\*.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Ordinance.

\_\_\_\_\_  
[Signature of the claimant]

Declared at \_\_\_\_\_, Hong Kong this \_\_\_\_\_ day  
of \_\_\_\_\_.

Before me,

\_\_\_\_\_  
[Signature of the Commissioner for Oaths]

*\* Delete whichever is inappropriate*