Non-Individual

Client Fulfillment & Service, 6/F, Lee Garden Two, 28 Yun Ping Road, Causeway Bay, Hong Kong.

YOUR PARTICULARS						
Name:						
Company / Registration Number:						
YOUR NEW ADDRESS						
Address Type C				egistered Address*		
Flat/Unit No	Floo	orBlock	k/House No.	P	ostal Code	
Building						
Street						
City						
Country Overseas (Please Specity)						
You may tick both Address Types if applicable UPDATING YOUR ACCOUNT(S) / SERVICES						
			will be undated	if not indicated helov	w)	
Please shade 1						
· '	, ,	unt(s) only (omit dashes):-				
<u> </u>		<u></u>	<u> </u>			
<u> </u>	iii		<u> </u>			
YOUR NEW CONTACT NUMBER(S) AND EMAIL ADDRESS						
YOUR NEW CONTACT N	DIMBER(2) AND	EMAIL ADDRESS				
Office General Tel No.	<u> </u>	2 1 /4 2 1 /4	0	ffice Fax No.	0 1 /1 0 1 /1	<u> </u>
	Country C	Code / Area Code / No.		Counti	ry Code / Area Code / I	NO.
Contact Person 1 Mobile No.				iffice No.		
Mobile No.	Country Code	/ Area Code / No.			de / Area Code / No.	
Email Address						
Contact Person 2						
Mobile No.	Country Code	/ Area Code / No.	0	ffice No.	de / Area Code / No.	
Email Address		, , , , ea coae , , , , , , , , , , , , , , , , , , ,			ue / / eu eu ue / e.	
Contact Person 3						
Mobile No.		/A 0 1 /N	0	ffice No.		
Email Address	Country Code	/ Area Code / No.		Country Co	de / Area Code / No.	
Please delete the follow	ng Contact(s),	telephone no and email	address			
Contact Person(s)						
AUTHORISATION & AGREEMENT We agree that the Bank may verify our signatures below against the same in the Bank's records and may effect the change of address for all accounts as						
stated above.						
Approved Person(s) / Authorized Signatori(es) & Company chop (if		Approved Person(s) / Authorized Signatori(es) & Company chop (if		Approved Person(s) / Authorized Date Signatori(es) & Company chop (if		
required)	nop (n	required)	chop (ii	required)	chop (ii	
Name(s): HKID/ Passport No.		Name(s): HKID/ Passport No.		Name(s): HKID/ Passport No	.	
FOR BANK USE ONLY		rinio, rassputtivo.		rikib/ rassport NC	,. 	
Attended By	Name		Sig	gnature(s) Verified By	Name	
	Name: Date:		_ _		Name: Date:	

Submission Checklist

Have you:

- 1) Filled in all applicable fields?
- 2) Signed against any alterations?
- 3) Signed in the "Authorisation & Agreement" section? i.e. Signing arrangement of Approved Person(s) or Account Signatures with unlimited amount authority (with company chop if applicable)
- 4) Attach copies of required documents below?
- *Copy of either one of the documents below for proof of residence within last 6 months and mail in together with the completed Change of Address Form for "Change of Registered Address". Address proof is not required for change of mailing address.

For a locally incorporated company:

(a) a CR company search report / BRC to shown the registered address

For a company incorporated overseas:

- (a) a similar company search enquiry of the registry in the place of incorporation and obtain a company report to shown the registered address;
- (b) a certificate of incumbency or equivalent issued by the company's registered agent to shown the registered address;
- (c) a similar or comparable document to a company search report or a certificate of incumbency certified by a professional third party in the relevant jurisdiction verifying that the information of