

Please complete this form in BLOCK LETTERS and return it to your financial advisors or send it to us at address below:
2701, 27/F., Berkshire House, 25 Westlands Road, Island East, Hong Kong.

請以正楷填寫整份文件，並遞交給閣下的財務顧問或寄送至：香港島東華蘭路 25 號栢克大廈 27 樓 2701 室。
Please select the appropriate service that you would like to apply: 請勾選閣下欲申請項目：

Plan Number
計劃號碼

1) Change of Contact Details of Plan Owner / 更改計劃持有人聯絡資料

● This change applies to Name of Plan Owner 欲更改資料的計劃持有人姓名：_____

Notes/注意：

- If your current residential/correspondence address is different from the country/region you submitted before or your tax residency has been changed, please submit a "Declaration of Self-Certification Form" together with this application.
若閣下的居住 / 通訊地址所在地不同於更改前的國家 / 地區，或閣下的稅務居民身份有所變更，請同時提交「自我證明聲明書」。
- If you become a US citizen or US tax resident, please notify us immediately and complete the US IRS Form W-9.
若閣下成為美國公民或美國稅務居民，請立即通知本公司，並填寫美國稅務局要求之W-9表格。
- Please complete separate forms for each owner who wishes to change their contact details in any Joint Applicants Plan.
如為共同持有人之計劃，若有多於一位的計劃持有人需更改聯絡資料，則每位計劃持有人請分別填寫本表格。

☐ Residential Address / 居住地址：

- ☐ Correspondence address is same as the residential address 通訊地址與新的居住地址相同
- ☐ Correspondence address remains the same, only change of residential address is required 通訊地址維持不變，僅更改居住地址
- ☐ New correspondence address is different from new residential address, change of both addresses is required (please fill in the following correspondence address field too) 新的通訊地址與新的居住地址不同，兩者皆要更改（請續填以下通訊地址欄位）

New Address in Local Language 新居住地址			
New Address in English 新居住地址（以英文填寫）			
Postal Code 郵政編碼		Country 國家	

Note: Please enclose certified true copy of address proof which is issued within the last 3 months for changing residential address.

注意：請附上經核實與新居住地址相符的地址證明，且該地址證明需距今不超過三個月。

☐ Correspondence Address / 通訊地址：

New Address in Local Language 新通訊地址			
New Address in English 新通訊地址（以英文填寫）			
Postal Code 郵政編碼		Country 國家	

Note: Post Office Box is not accepted as Correspondence Address.

注意：恕不接受郵政信箱作為通訊地址。

☐ Contact Details / 聯絡資料：

<input type="checkbox"/> Mobile 手機			<input type="checkbox"/> Fax 傳真		
	country code 國碼	phone number 電話號碼		country code 國碼	area code 區碼
<input type="checkbox"/> Office 公司			<input type="checkbox"/> Home 住宅：		
	country code 國碼	area code 區碼		phone number 電話號碼	country code 國碼
<input type="checkbox"/> Email/電郵					

2) Change of Annual Statement / 更改年度對賬單

● Language of Statement 對賬單語言選擇：☐ Chinese 中文 ☐ English 英文

● Delivery way of Annual Statement 年度對賬單寄送方式：

- ☐ By E-mail# 以電郵傳送# ☐ By Post 郵寄 ☐ No Delivery, will check on-line 不須寄送，自行上網查看

Please write down your E-mail address in the section of "Contact Details" above if you did not submit your E-mail address before or you would like to change your E-mail address.

如欲更改為「以電郵傳送」，但閣下先前未提供或想更改電郵信箱，請於上方「聯絡資料」欄位填上閣下新的電郵信箱。

3) Change of Personal Particulars / 更改計劃持有人個人資料

I/We would like to change: 本人/吾等欲變更以下勾選事項：

<input type="checkbox"/> Change of Name ¹ 更改姓名 ¹	Existing Name in English 原英文姓名		New Name in English 新英文姓名	
	Existing Name 原姓名		New Name 新姓名	
	Existing Signature 原簽名樣式		New Signature 新簽名樣式	✓
<input type="checkbox"/> Change of Nationality ² 更改國籍 ²	Existing Nationality 原國籍	<input type="checkbox"/> Remain 保留 <input type="checkbox"/> Give up 放棄	New Nationality 新增國籍	
<input type="checkbox"/> Others, 其他 Please specify 請說明:				

Remarks 說明:

- Metis will only process the name change after receiving the certified ID & address proof copy with new name and official document on name change.
如更改姓名，請同時附上經核實之更改後新姓名的身份證明、住址證明及正式改名的證明文件複本，方可接受更名申請與變更簽樣。
- Please enclose a certified copy of updated passport or new identification shown the new nationality. Also please submit a "Declaration of Self-Certification Form" together with this application. If change to US citizenship, please complete IRS Form W-9.
如更改國籍，請附上新的護照或身份證明並同時提交「自我證明聲明書」。如更改為美國籍則請同時提供 IRS W-9 表格。

4) Change of Servicing Agent / 更改服務顧問

I/We would like to change my/our Servicing Agent as shown on below: 本人 / 吾等欲更改本人 / 吾等的顧問如下所示：

- Name of Servicing Agent: 顧問名稱：_____
- Code of Servicing Agent: 顧問編號：_____

5) Change of Signature Authority / 更改簽名授權選擇

(Applicable to Joint Owners Plan only / 僅適用共同持有人計劃)

- ☐ I/We would like to change Signature Authority to authorize "Any One of the Plan Owners to Sign".
本人 / 吾等欲更改簽名授權為「任一持有人簽署即可」。

Noted: Metis will only accept written requests/documents signed by all Plan Owners for the following: changes of Plan ownership, changes to Plan contributions, changes to letter of wishes, any distributions/withdrawals or any other documentation as Metis may require from time to time.

注意：有關以下申請事項，安智僅接受經所有持有人簽署的書面文件或指示：凡涉及計劃所有權的變更、計劃供款的更改、意願書的更新、任何提款、或任何其他安智認定需由所有持有人簽署之申請。

6) Change to Receive Marketing Communication / 更改接收行銷資訊要求

- ☐ I/We **agree** to receive marketing communication from Metis and the Metis' affiliates in future.
本人 / 吾等**同意**收取由安智及安智的聯屬公司所發出的行銷資訊。
- ☐ I/We **do not agree** to receive marketing communication from Metis and the Metis' affiliates in future.
本人 / 吾等**不同意**收取由安智及安智的聯屬公司所發出的行銷資訊。

Noted: Metis may use your name, phone number, email address and correspondence address for direct marketing communications by telephone, email, or mail to keep you informed about other Plans and services provided by Metis and the Metis' affiliates only with your consent.

注意：安智在徵得閣下同意後，或將使用閣下的姓名、電話號碼、電郵地址及通訊地址，透過電話、電郵或郵寄方式，將安智及安智聯屬公司其他計劃及服務之行銷活動與訊息直接提供給閣下。

7) Others / 其他

Please specify the personal information that you would like to change. 請詳述閣下欲更改之個人資料事項：

Declaration and Signature / 聲明與簽署

Declaration 聲明

I/We hereby declare that any personal information of third parties provided by me/us to Metis Global Limited/Metis Global (Cook Islands) Limited* ("Metis") (whether provided under this application or otherwise provided) in relation to this application has been obtained by me/us in compliance with the PDPO/Personal Information Collection Statement* and the relevant third party has agreed to the disclosure of his/her personal information to Metis in relation to this application for the purposes as set out in the Personal Information Collection Statement. I/We agree to indemnify and hold harmless, on demand against all losses, liabilities and costs which Metis may incur arising out of, or in connection with, any breach of the declaration set forth in this paragraph. 本人 / 吾等特此聲明，就此申請提供予安智環球服務有限公司/安智環球服務（庫克群島）有限公司*（「安智」）的任何第三方個人資料（無論載於此申請書或從其他途徑所提供）乃由本人 / 吾等在遵守個人資料（私隱）條例/收集個人資料聲明*的情況下獲得，且有關第三方已同意為此等個人資料收集聲明所載之目的就此申請向安智提供其個人資料。本人 / 吾等同意應安智要求，就安智因發生任何違反本條款所載的聲明，而可能招致或與之相關的任何損失、責任及費用，對安智作出賠償，並使安智免受損害。

Servicing Agent/Portfolio Manager (if applicable) 服務代表/組合經理人 (如適用)

I/We agree to Metis disclosing all information relating to my/our Plan to my/our appointed Portfolio Manager and Servicing Agent. I/We will let Metis know in writing if I/we decided to change my/our appointed Portfolio Manager or Servicing Agent. I/We also understand that my/our authorized Portfolio Manager or Servicing Agent is acting on my/our behalf and not on Metis' behalf. 本人 / 吾等同意，安智揭露有關申請本計劃資料予本人 / 吾等所指定之組合經理人及服務代表。本人 / 吾等如欲更換組合經理人或服務代表，本人 / 吾等將以書面通知安智。本人 / 吾等同時也明白本人 / 吾等所指定之組合經理人或服務代表是以本人 / 吾等的代理人身份行事，並非安智的代理人。

Availability 可適性

I/We declare that I am/we are not (and I am/we are not making this application on behalf of) a U.S. resident/citizen or a U.S. person as defined under FATCA (Foreign Account Tax Compliance Act). If my/our tax residency and status changes or I/we become a U.S. citizen or tax resident, I/we must notify Metis immediately (and in any event within 30 days of I/we becoming a US citizen or US tax resident) and submit a new "Declaration of Self-Certification Form" or US IRS Form W-9. 本人 / 吾等聲明不是（且不代表）美國居民 / 公民，或是美國FATCA（外國賬戶稅收遵從法）認定之美國人。若本人 / 吾等的稅務居民身份與狀況有更改，或成為美國公民或稅務居民，本人 / 吾等會盡快通知安智（且在任何情形下成為美國公民或稅務居民的30日內），並重新提交一份新的「自我證明聲明書」或美國稅務局規定之W-9表格。

Commission/Referral Fee Disclosure for Intermediaries 中介人的佣金/介紹費披露

I/We understand, acknowledge and agree that, as a result of my/our purchasing and taking up the Plan issued by Metis, Metis will pay the Intermediaries Commission/Referral Fee during the continuance of the Plan including renewals, for arranging the said Plan. Where I am/we are a body corporate, the authorized person who signs on behalf of myself/ourselves further confirms to Metis that he or she is authorized to do so. I/We further understand that the above agreement is necessary for Metis to proceed with the application. 本人 / 吾等明白、確知及同意，安智會就本人 / 吾等購買及接受安智簽發的計劃，於計劃有效期內（包括續供款期），向負責安排有關計劃的中介人支付佣金 / 介紹費。假如本人 / 吾等為法人團體，代表本人 / 吾等簽署的獲授權人員須向安智確認他 / 她已獲法人團體授權簽署。本人 / 吾等亦明白安智必須取得本人 / 吾等的同意，才可以處理有關申請。

Legal 法規

I/We understand that Metis is an authorized Trust Company in Hong Kong/Cook Islands*. I/We acknowledge and agree that the Plan Schedule, if issued, will be governed by the laws of Hong Kong/Cook Islands* and be subjected to the jurisdiction of the Hong Kong/Cook Islands* courts. I/We fully understand the risks (including but not limited to the counterparty risks, market and financial risks associated with assets in the Plan) and merits, as well as the legal, tax and accounting characteristics and the consequences of asset allocation in the Plan. I/We have consulted my/our own financial, accounting, tax and legal advisors as I/we deem necessary or appropriate.

本人 / 吾等明白安智是獲香港 / 庫克群島*授權之信託公司，本人 / 吾等了解並同意計劃契約書若發出，乃受香港 / 庫克群島*法令規管並以香港 / 庫克群島*法院為管轄地。本人 / 吾等完全明白申請本計劃的風險（包括但不限於本計劃資產所涉及的交易對手風險、市場及財務風險）及利弊，以及有關本計劃的法律、稅務、會計特點及資產配置的結果。本人 / 吾等若覺需要或適當，將向本人 / 吾等的財務、會計、稅務、法律顧問尋求諮詢。

*Please delete as appropriate 請刪除不適用

Signature of the Plan Owner/ Authorized Signatory 持有人/被授權人簽名		Signature of the Plan Owner/ Authorized Signatory 持有人/被授權人簽名	
Printed Name 姓名		Printed Name 姓名	
Signature of the Plan Owner/ Authorized Signatory 持有人/被授權人簽名		Signature of the Plan Owner/ Authorized Signatory 持有人/被授權人簽名	
Printed Name 姓名		Printed Name 姓名	
Plan Number 計劃號碼		Date Signed 簽署日期	D M Y 日 月 年

Notes: Apart from this "Change of Personal Information Form", please also enclose the following forms/documents and send them to Metis together (if applicable).
注意：除此「更改個人資料申請表」外，敬請連同下列表格及文件等，一同寄送至安智（如適用）。

1. Certified "Identification document" and "address proof" of the Plan Owner(s) who would like to amend the Residential address/Nationality/Name.
經核實之欲修改居住地址 / 國籍 / 更改姓名之計劃持有人的「身分證明」及「住址證明」。
2. A new "Declaration of Self-Certification Form", if the Plan Owner(s) has changed the tax residency. (If tax residency has been changed to US, please provide W-9)
填妥更新的「自我證明聲明書」，若計劃持有人變更國籍或稅務居民身份。（若改為美國稅務居民身分，則需遞交 W-9 表格）