<u>更改客戶資料 (個人帳戶) 和自我證明書</u> <u>CHANGE OF ACCOUNT DETAILS (INDIVIDUAL ACCOUNT) and Self-Certification Form</u>

* 此欄必須填寫 Mandatory Fields

* 帳戶號碼 Account Number:	* 帳戶名稱 Account Nam	ne:	
* 日間聯絡電話號碼 Day Time Contact No:	* 生效日期 Effective Date	e:	(DD/MM/YYYY)
頁更改之資料如下 Please update my/our information a	 us below [請在相關之		propriate box]
□ 1. 更改帳戶持有人現居住地址 Change in (新居住地址 New Residential address: (請附上 第1行 (例如:室、樓層、大廈、街道、地區) Line 1 (House / Apt/Suite Name, Number, Street)	Current Residentia	al Address:	-
第 2 行(城市)(Line 2			
Town/City/Province/Country/State)			
國家 Country:		編碼/郵遞區號碼	
*不接受郵政信箱 No P.O. Box is accepted	Postai	Code/ZIP Code:	
□ 2. 更改帳戶持有人郵遞地址Change in Ma	iling Addross:		
3. 更以軟戸行有人郵鑑地址 Change in Ma 新通訊地址 New Mailing address: (請附上三個 第1行(例如:室、樓層、大廈、街道、地區)		證明。Please enclose address proo	f issued within 3 months.)
Line 1 (House /Apt/Suite Name, Number, Street)			
第 2 行(城市)(Line 2 Town/City/Province/Country/State)			
Iown/City/Province/Country/State) 國家 Country:	郵政約	編碼/郵遞區號碼	
	I * * * * * * * * * * * * * * * * * * *	l Code/ZIP Code:	
□ 3. 更改帳戶持有人聯絡號碼 Change in Co	ontact Numbers:		
新住宅電話號碼		新手提電話號碼	
New residential phone number:		New mobile phone number: _	
新公司電話號碼		新傳真號碼	
New office phone number:	1 A 33	New fax number:	
□ 4. 更改帳戶持有人電郵地址 Change in Em	iail Address.		
新電郵地址 New email address:			
□ 5. 更改郵遞方式 Change of Mailing Metho	od:		
□ 選擇甲:請將綜合買賣合約結單及月結單以 Option A: Please send the buy / sell contract correspondence address.			
□ 選擇乙:請將綜合買賣合約結單及月結單以 Option B: Please send the buy / sell contract			
聲明 Declaration: 本人/我們同意及接受京華山一將不時透過以上指定之電子郵箱正式通知。京華山一將不會對因通訊設施發生故障或傳送失靈意京華山一將不時透過郵遞或電子郵件向本人/我們發出任何有	,或非本公司控制範圍或	預測之任何其他原因所造成傳送或收耳	
I/We accept and agree that Core Pacific - Yamaichi may send to m mail address, those e-mail shall be treated as formal written notic communication equipment failure, or circumstance beyond its cont report to me/us from time to time.	e. Core Pacific - Yamaich	ni will not be responsible for lost / dela	y in communication or transmission due to
□ 6. 更改經紀 Change Account Executive:			
± E	F.G.1	至 To:	(A.E. Code
⊞ From: (A.	E. Code)	+ 10.	(11.E. Code

Version: Apr 2017-2

必須填寫 Mandatory 8. 共同匯報標準-自我證明表格 Self-Certification for Common Reporting Standard □ 本人/我們確定共同匯報標準之自我證明內容沒有更改 I/We confirm there is no change to my Self-Certification for Common Reporting Standard □ 本人/我們更改共同匯報標準之自我證明內容 (**必須重新填寫共同匯報標準-自我證明表格如下**) I/We have to update the Self-Certification for Common Reporting Standard (Mandatory to fill in Self-Certification for Common Reporting Standard) 請補充以下資料 Please provide below supplementary information: 出生日期: (日/月/年) 出生地: (國家) 出生地: (城市/省份) Date of Birth: (dd/mm/yyyy) Place of Birth: (Country) Place of Birth: (City/Town) 請提供以下資料,列明(a)帳戶持有人的居留司法管轄區,亦即帳戶持有人的稅務管轄區(香港包括在內)及(b)該居留司法管轄區發給帳戶持有人的稅務 編號。列出所有(不限於3個)居留司法管轄區 如帳戶持有人是香港稅務居民,稅務編號是其香港身份證號碼。 如沒有提供稅務編號,必須填寫合適的理由: 理由 A - 帳戶持有人的居留司法管轄區並沒有向其居民發出稅務編號。 理由 B - 帳戶持有人不能取得稅務編號。如選取這一理由,解釋帳戶持有人不能取得稅務編號的原因。 理由 C-帳戶持有人毋須提供稅務編號。居留司法管轄區的主管機關不需要帳戶持有人披露稅務編號。 Please complete the following table indicating (a) the jurisdiction of residence (including Hong Kong) where the account holder is a resident for tax purposes and (b) the

account holder's TIN for each jurisdiction indicated. Indicate all (not restricted to three) jurisdictions of residence. If the account holder is a tax resident of Hong Kong, the TIN is the Hong Kong Identity Card Number.

If a TIN is unavailable, provide the appropriate reason A, B or C:

Reason A - The jurisdiction where the account holder is a resident for tax purposes does not issue TINs to its residents.

Reason B - The account holder is unable to obtain a TIN. Explain why the account holder is unable to obtain a TIN if you have selected this reason.

Reason C - TIN is not required. Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed

區 Juri	存物権所屬國家/地 sdiction of tax dence	稅務管轄權所屬國家/地區之稅務識別 號碼 TIN*	如客戶未能提供有關稅務管轄權所屬國家/地 區之稅務識別號碼須提供以下 A,B 或 C 原 因。 Enter Reason A, B or C if no TIN is available	如選取理由 B,解釋帳戶持有人不能取 得稅務編號的原因 Explain why the account holder is unable to obtain a TIN if you have selected Reason B**
1				
2				
3				

*例: 如帳戶持有人是香港稅務居民,稅務編號是其香港身份證號碼: 中國之 TIN 稱為公民身份號碼。不同國家/地區之稅務識別號碼 TIN 規範及詳情, 請參閱國 際經合組織官方網站 http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/

E.g. If the account holder is a tax resident of Hong Kong, the TIN is the Hong Kong Identity Card Number, and the CRS TIN for a Chinese individual will be the ID number on the Chinese ID card. For the domestic rules of TIN of different jurisdictions, please refer to OECD website: http://www.oecd.org/tax/automatic-exchange/crsimplementation-and-assistance/tax-identification-numbers/

本人知悉及同意,財務機構可根據《稅務條例》(第112章)有關交換財務帳戶資料的法律條文,(a)收集本表格所載資料並可備存作自動交換財務帳戶資料 用途及(b)把該等資料和關於帳戶持有人及任何須申報帳戶的資料向香港特別行政區政府稅務局申報。從而把資料轉交到帳戶持有人的居留司法管轄區的稅 務當局。本人證明,就與本表格所有相關的帳戶,本人獲帳戶持有人授權簽署本表格。

本人承諾,如情況有所改變,以致影響本表格所述的實體的稅務居民身分,或引致本表格所載的資料不正確,本人會通知京華山一國際及/或京華山一期 貨,並會在情況發生改變後30日內,向京華山一國際及/或京華山一期貨提交一份已適當更新的自我證明表格。

本人聲明就本人所知所信,本表格內所填報的所有資料和聲明均屬真實、正確和完備。

I acknowledge and agree that (a) the information contained in this form is collected and may be kept by the financial institution for the purpose of automatic exchange of financial account information, and (b) such information and information regarding the account holder and any reportable account(s) may be reported by the financial institution to the Inland Revenue Department of the Government of the Hong Kong Special Administrative Region and exchanged with the tax authorities of another jurisdiction or jurisdictions in which the account holder may be resident for tax purposes pursuant to the legal provisions for exchange of financial account information provided under the Inland Revenue Ordinance (Cap.112).

I certify that I am authorized to sign for the account holder of all the account(s) to which this form relates.

I undertake to advise CPYI and/or CPYF of any change in circumstances which affects the tax residency status of the individual identified in this form or causes the information contained herein to become incorrect, and to provide CPYI and/or CPYF with a suitably updated self-certification form within 30 days of such change in

I declare that the information given and statements made in this form are, to the best of my knowledge and belief, true, correct and complete

警告:根據《稅務條例》第80(2E)條,如任何人在作出自我證明時,在明知一項陳述在要項上屬具誤導性、虛假或不正確,或罔顧一項陳述是否在要項上屬具 誤導性、虛假或不正確下,作出該項陳述,即屬犯罪。一經定罪,可處第3級(即\$10,000)罰款。

WARNING: It is an offence under section 80(2E) of the Inland Revenue Ordinance if any person, in making a self-certification, makes a statement that is misleading, false or incorrect in a material particular AND knows, or is reckless as to whether, the statement is misleading, false or incorrect in a material particular. A person who commits

the offence is fiable on conviction to a fine at level 5 (i.e. \$10,000).				
客戶簽署 Customer Signature(s):	omer Signature(s): For Internal Use Only			
(請用閣下於開戶書上之簽署式樣) (same as specimen on Account Opening Form)	本人聲明就本人所知所信, 帳戶特有人填報的所有資料及聲明均屬真實,正確和完備I declare that the information given by the account holder and statements made in this form are, to my best knowledge and belief, true, correct and complete.			
		AE Signature	Date	
		AOT		
	Client Signature verify by	Input by	Authorized by	
(所有聯名客戶必須簽署(All account holders of joint account				
must sign jointly)		Date	Date	
	Customer Services Department:			
日期 Date:				
	1			

請將填妥表格,交回香港灣仔港灣道 26 號華潤大廈 11 樓或傳真至 (852) 2918-0409 京華山一國際(香港)有限公司 AOT 收。

Please return signed form to Core Pacific - Yamaichi International (H.K.) Limited - AOT, 11/F, China Resources Building, 26 Harbour Road, Wanchai, Hong Xong or by fax to (852) 2918-0409.

Form W-8BEN

(Rev. July 2017)

Department of the Treasury Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.

- Go to www.irs.gov/FormW8BEN for instructions and the latest information.
- ▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NO	OT use this form if:		Instead, use Form:
• You	are NOT an individual		W-8BEN-E
• You	are a U.S. citizen or other U.S. person, including a resident alien individual		W-9
	are a beneficial owner claiming that income is effectively connected with the conducer than personal services)	t of trade or busines	ss within the U.S.
• You	are a beneficial owner who is receiving compensation for personal services performe	ed in the United Stat	es 8233 or W-4
• You	are a person acting as an intermediary		W-8IMY
	If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction wit ded to your jurisdiction of residence.	h reciprocity), certai	n tax account information may be
Par	Identification of Beneficial Owner (see instructions)		
1	Name of individual who is the beneficial owner	2 Country of	f citizenship
3	Permanent residence address (street, apt. or suite no., or rural route). Do not use a	P.O. box or in-car	e-of address.
	City or town, state or province. Include postal code where appropriate.		Country
4	Mailing address (if different from above)		
	City or town, state or province. Include postal code where appropriate.		Country
5	U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)	6 Foreign ta	x identifying number (see instructions)
7	Reference number(s) (see instructions) 8 Date of birth (MM-D)	DD-YYYY) (see instru	uctions)
Par	Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)	
9	I certify that the beneficial owner is a resident of	,	within the meaning of the income tax
	treaty between the United States and that country.		_
10	Special rates and conditions (if applicable—see instructions): The beneficial own		
	of the treaty identified on line 9 above to claim a	% rate of withh	nolding on (specify type of income):
	Explain the additional conditions in the Article and paragraph the beneficial owner	meets to be eligible	for the rate of withholding:
Part			
	penalties of perjury, I declare that I have examined the information on this form and to the best o	f my knowledge and be	elief it is true, correct, and complete. I further
	under penalties of perjury that:	,ou.ougo uu so	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	I am the individual that is the beneficial owner (or am authorized to sign for the individual that i am using this form to document myself for chapter 4 purposes,	s the beneficial owner)	of all the income to which this form relates or
•	The person named on line 1 of this form is not a U.S. person,		
•	The income to which this form relates is:		
	(a) not effectively connected with the conduct of a trade or business in the United States,		
	(b) effectively connected but is not subject to tax under an applicable income tax treaty, or		
	(c) the partner's share of a partnership's effectively connected income,		
•	The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the United States and that country, and		,
•	For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person		
	Furthermore, I authorize this form to be provided to any withholding agent that has control, recany withholding agent that can disburse or make payments of the income of which I am the beinf any certification made on this form becomes incorrect.		
Sign	Here		
	Signature of beneficial owner (or individual authorized to sign for benef	icial owner)	Date (MM-DD-YYYY)
	Print name of signer	Capacity in which a	cting (if form is not signed by beneficial owner)
		N 050477	5 W OPEN (P. 7 2017)