

To: **The Hongkong and Shanghai Banking Corporation Limited**

For Bank Use Only

Account Number

Branch Chop

MANDATE FOR ACCOUNTS OF A SOLE PROPRIETORSHIP

- Note:**
1. Please complete in **Block Letters** and tick where applicable.
 2. + Please insert the full name of the authorised person(s).
 3. All alterations to this form must be initialled by the Sole Proprietor.
 4. Please note that no chop of the Firm needs to be or should be affixed to any part of this form, and even if so affixed, will not form part of the signing authority or mandate under any circumstances.

Name of Firm
Registered Address

1. I, the undersigned, being the Sole Proprietor of the Firm of []

[] hereby request and authorise the Bank

to open or continue (as the case may be) a [Type of Account] []

account and any other account or accounts in the name of the Firm as may be subsequently directed by myself or by + []

[] ,

who is/are authorised to complete and sign all the relevant account opening forms (and any documents incidental or relating thereto) and agree any amendment to such forms and documents from time to time on behalf of the Firm.

2. I authorise and request the Bank to honour and to comply with all cheques, promissory notes, orders, bills or receipts given or accepted on behalf of the Firm, whether the current account be in credit or overdrawn, to comply with all directions given for or in respect of any account or accounts of any kind whatsoever on behalf of the Firm including without limitation to close such account(s) unless otherwise agreed with the Bank, provided that such cheques, promissory notes, orders, bills, receipts or directions are signed or given in such form or manner or by such means as shall be acceptable to the Bank at any time and from time to time by myself or by + []

[] .

3. Any securities or other property of or deposited in the name of the Firm may be withdrawn and any monies may be borrowed from the Bank in the name or on behalf of the Firm, and may be secured in any manner upon any securities, monies or property of or deposited in the name of the Firm by any myself or by [] .

4. If any of the accounts is a solicitors' client account, we undertake to comply with the Solicitors' Accounts Rules (Cap. 159F) and that any withdrawal from a solicitors' client account must be made in accordance with and by a person authorised to do so pursuant to section 7A of the Solicitors' Accounts Rules (Cap. 159F). We confirm that all of the persons who are authorised to operate the solicitors' client accounts (including all named authorised signatories of the solicitors' client accounts as set out in this application/request) comply with the Solicitors' Accounts Rules (Cap. 159F).

5. In the absence of any directions to the contrary, all accounts subsequently opened shall be operated and dealt with upon the terms set out above insofar as the same may be applicable.

Dated at the Hong Kong Special Administrative Region this [] day of [] .

Signature of Sole Proprietor

X

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Account Number

Sole Proprietor

Full Name (<i>Including Surname, Given Name and Other Name</i>)		Date of Birth (<i>Day/Month/Year</i>)	Place of Birth
Identification Document Type			Number
<input type="checkbox"/> HK Identity Card (Permanent <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Passport <input type="checkbox"/> Others: _____			
Complete the information and tick for the PROOFS enclosed			
<input type="checkbox"/> Nationality (Country/Region) 1 _____		<input type="checkbox"/> Multiple Nationalities (Countries/Regions) (<input type="checkbox"/> Yes <input type="checkbox"/> No) Nationality (Country/Region) 2 _____	
		Nationality (Country/Region) 3 _____	
<input type="checkbox"/> Residential Address _____			
<input type="checkbox"/> Address Since Date (<i>Month/Year</i>)			
<input type="checkbox"/> Previous Address (If the current residential address is less than 3 years) _____			
<input type="checkbox"/> Permanent Address (If different from residential address) _____			
			Specimen Signature
			X

Other Persons Authorised to Sign as above

Full Name (<i>Including Surname, Given Name and Other Name</i>)		Date of Birth (<i>Day/Month/Year</i>)	Specimen Signature
Identification Document Type		Number	
<input type="checkbox"/> HK Identity Card (Permanent <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Passport <input type="checkbox"/> Others: _____			
Complete the information and tick for the PROOFS enclosed			
<input type="checkbox"/> Nationality (Country/Region) _____			
<input type="checkbox"/> Residential Address _____			
<input type="checkbox"/> Permanent Address (If different from residential address) _____			
			X

Full Name (<i>Including Surname, Given Name and Other Name</i>)		Date of Birth (<i>Day/Month/Year</i>)	Specimen Signature
Identification Document Type		Number	
<input type="checkbox"/> HK Identity Card (Permanent <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Passport <input type="checkbox"/> Others: _____			
Complete the information and tick for the PROOFS enclosed			
<input type="checkbox"/> Nationality (Country/Region) _____			
<input type="checkbox"/> Residential Address _____			
<input type="checkbox"/> Permanent Address (If different from residential address) _____			
			X

Full Name (<i>Including Surname, Given Name and Other Name</i>)		Date of Birth (<i>Day/Month/Year</i>)	Specimen Signature
Identification Document Type		Number	
<input type="checkbox"/> HK Identity Card (Permanent <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Passport <input type="checkbox"/> Others: _____			
Complete the information and tick for the PROOFS enclosed			
<input type="checkbox"/> Nationality (Country/Region) _____			
<input type="checkbox"/> Residential Address _____			
<input type="checkbox"/> Permanent Address (If different from residential address) _____			
			X

譯文

(此譯文僅供客戶參考，不能用以簽署)

致：香港上海滙豐銀行有限公司

獨資戶口授權書

- 注意：1. 請用正楷填寫並在適當的地方加上別號。
2. + 請填寫授權人士的全名。
3. 凡經修改之處，必須由獨資經營人簡簽。
4. 閣下毋須亦不應在本表格的任何部分蓋上商號印章。在任何情況下，所蓋上的商號印章將不會構成授權簽署的一部分。

銀行專用
Account Number
Branch Chop

商號名稱
登記地址

1. 本人為 的獨資經營人。
茲要求並授權貴行開立或續開 (按具體情況) — 戶口，及於日後經本人或 + 的指示，用本號的名義，開立其他任何戶口。
2. 無論支票戶口存有結餘或已透支，本人授權並要求貴行兌現、遵守、執行或接納代表本號發出或接納的支票、本票、匯票、票據或收款 (視適用情況而定)，並遵從代表本號就任何戶口種類所發出包括但不限於取消該等戶口的指示，惟該等支票、本票、匯票、票據、收款或指示所採用的形式或方法須為貴行隨時及不時所接納，並需經本人或經 + 簽署指示所作出。
3. 本人或 + 均得收回本號所有或用本號名義存放在貴行的抵押物品或其他財物；亦得用本號的名義，以任何抵押品、或以任何用本號名義存放於貴行的款項或財物，向貴行借貸款項。
4. 如任何戶口為律師之當事人帳戶，本人等承諾遵守《律師帳目規則》(第 159F 章)，並且從律師之當事人帳戶中提取任何款項，必須根據《律師帳目規則》(第 159F 章)第 7A 條進行並由根據該規則而獲授權人士進行。本人等確認，獲授權操作律師之當事人帳戶的所有人士 (包括本申請 / 要求所載律師之當事人帳戶的所有指定獲授權簽署人)，均遵守《律師帳目規則》(第 159F 章)。
5. 如無相反的指示，此後所開立的各種戶口，均按上述各項的規定，相應處理。

日期：香港特別行政區 年 月 日。

獨資經營人簽署

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銀行專用

Account Number

獨資經營人

全名 (包括姓、名及其他名)		出生日期 (日/月/年)	出生地區
身分證明文件種類		號碼	
<input type="checkbox"/> 香港身分證 (永久 <input type="checkbox"/> 是 <input type="checkbox"/> 否) <input type="checkbox"/> 護照 <input type="checkbox"/> 其他: _____			
在已附上的證明文件旁邊加別號並填寫有關資料			
<input type="checkbox"/> 國籍 (國家/地區) 1		<input type="checkbox"/> 多重國籍 (國家/地區) (<input type="checkbox"/> 是 <input type="checkbox"/> 否)	
_____		國籍 (國家/地區) 2 國籍 (國家/地區) 3	
<input type="checkbox"/> 住宅地址 _____		國籍 3 _____	
<input type="checkbox"/> 現址居住日期 (月/年) _____		簽署式樣	
<input type="checkbox"/> 前址 (如居於現址少於三年, 請註明之前的地址)		X	
<input type="checkbox"/> 永久住址 (如與住宅地址不同)			

上述其他授權簽署人

全名 (包括姓、名及其他名)		出生日期 (日/月/年)	簽署式樣
身分證明文件種類		號碼	
<input type="checkbox"/> 香港身分證 (永久 <input type="checkbox"/> 是 <input type="checkbox"/> 否) <input type="checkbox"/> 護照 <input type="checkbox"/> 其他: _____			
在已附上的證明文件旁邊加別號並填寫有關資料			
<input type="checkbox"/> 國籍 (國家/地區) _____			
<input type="checkbox"/> 住宅地址 _____			
<input type="checkbox"/> 永久住址 (如與住宅地址不同)			

全名 (包括姓、名及其他名)		出生日期 (日/月/年)	簽署式樣
身分證明文件種類		號碼	
<input type="checkbox"/> 香港身分證 (永久 <input type="checkbox"/> 是 <input type="checkbox"/> 否) <input type="checkbox"/> 護照 <input type="checkbox"/> 其他: _____			
在已附上的證明文件旁邊加別號並填寫有關資料			
<input type="checkbox"/> 國籍 (國家/地區) _____			
<input type="checkbox"/> 住宅地址 _____			
<input type="checkbox"/> 永久住址 (如與住宅地址不同)			

全名 (包括姓、名及其他名)		出生日期 (日/月/年)	簽署式樣
身分證明文件種類		號碼	
<input type="checkbox"/> 香港身分證 (永久 <input type="checkbox"/> 是 <input type="checkbox"/> 否) <input type="checkbox"/> 護照 <input type="checkbox"/> 其他: _____			
在已附上的證明文件旁邊加別號並填寫有關資料			
<input type="checkbox"/> 國籍 (國家/地區) _____			
<input type="checkbox"/> 住宅地址 _____			
<input type="checkbox"/> 永久住址 (如與住宅地址不同)			
