

Use of Client Deposit Related Information Consent Form (For Non-Individual Clients)[#] 客戶存款相關資料運用同意書 (非個人客戶)[#]



[#] For non-individual client who is sole proprietorship/partnership/limited company/corporation/association or society
如非個人客戶為獨資經營公司/合夥商行/有限公司/法團/社團

Please complete this form and mail to Standard Chartered Bank (Hong Kong) Limited at G.P.O. Box 21, Hong Kong
請填妥表格及寄回香港郵政信箱21號渣打銀行(香港)有限公司收

Client Information 客戶資料 (Please complete in block letters 請用正楷填寫)

Company Name (English):
公司名稱 (英文)

Business operated as: Sole Proprietor 獨資公司 Partnership 合夥公司 Limited Company 有限公司
 Association/Society 社團 Corporation 法團
 Other 其他 _____

Identity Document 証明文件 :

Certificate of Incorporation No.
公司註冊證號碼 _____

Business Registration Certificate No.
商業登記證號碼 _____

Others (specify)
其他 (請註明) _____

Contact Phone Number* 聯絡電話號碼*:

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Client Instruction 客戶指示 Please "✓" the appropriate box 請於適合方格填上 "✓"

I/We am/are interested in investment/wealth management services and **AGREE** to allow Standard Chartered Bank (Hong Kong) Limited to access and utilize my/our deposit-related information for considering and selecting investment/wealth management services to me/us.
本人/吾等對投資/財富管理產品有興趣並**同意**渣打銀行(香港)有限公司查閱及使用本人/吾等之存款相關資料作為考慮及選擇向本人/吾等介紹投資/財富管理產品之用。

I/We am/are NOT interested in investment/wealth management services and **DO NOT AGREE** to allow Standard Chartered Bank (Hong Kong) Limited to access and utilize my/our deposit-related information for considering and selecting investment/wealth management services to me/us.
本人/吾等對投資/財富管理產品並無興趣而且**不同意**渣打銀行(香港)有限公司查閱及使用本人/吾等之存款相關資料作為考慮及選擇向本人/吾等介紹投資/財富管理產品之用。

Client Signatory 客戶簽署

Approving/Authorized Signatory
認可/獲授權人簽署

Approving/Authorized Signatory (If applicable)
認可/獲授權人簽署 (如適用)

Name
姓名 _____

Name
姓名 _____

HKID/Passport No.
香港身份證/護照號碼 _____

HKID/Passport No.
香港身份證/護照號碼 _____

Date
日期 _____

Date
日期 _____

For Bank Use Only 銀行專用

Sales staff name:	Sales Staff ID:	Signature verified by (IO):
Signature verified by: (Signing No.) (CSM)	Date, Time & Extension (by Phone):	