

Office 分行 _____

Date 日期 _____

STANDING INSTRUCTION (TRANSFER OF FUNDS) BASED ON BALANCE

以結餘為準的常行指示 (款項轉賬)

IMPORTANT NOTE 重要提示: 1. Debit account currency must be the same as the payment currency. 扣款帳戶的貨幣必須和付款貨幣相同。
 2. Your account will be debited on the working day before your designated transaction value day. 付款金額將於您指定付款日期的前一個工作天扣除。
 3. This service is only applicable to internal transfer. 此表格只適用於內部轉賬。

Note 注意: Please tick where applicable. 請在適合地方加 號

New Standing Instruction 新常行指示 (Please complete all applicable boxes 請填寫所有適當的方格)

Amendment of Existing Standing Instruction 修改原來的常行指示
 (Please complete box numbers 1, 2, 3, 6, 8 and 9 as well as those boxes you wish to amend 請填寫方格 1, 2, 3, 6, 8, 9 號及其他欲修改的方格)

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| <p>1. Primary Account Number 基本戶口號碼 (to be debited 扣數戶口)</p> | <p>2. Account Name 戶口名稱</p> |
| <p>3. Effective Date 生效日期 (i.e. Date after which first transfer can be effected 即自該日起可進行首次轉賬)</p> | <p>4. Last Payment Date 最後付款日期 (Leave blank if you wish the instruction to continue until further notice 如欲本指示持續至另有通知為止者 請將此格留空)</p> |
| <p>5. Priority 優先次序 [If not specified, this standing instruction will be generated after all other standing instruction(s) based on balance 如無註明, 本常行指示將繼其他所有以結餘為準的常行指示後生效]</p> | |

Please complete either Option 1 or Option 2 請填寫選擇一或選擇二

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| <p>6. Option 1 (To maintain the Primary Account within a chosen balance range) 選擇一 (指定基本戶口的結餘水平)</p> | |
| <p>Low Balance Level 低結餘水平 _____</p> | <p>When the credit balance (less holds) of the Primary Account mentioned above is LOWER than this level, the balance level will be reinstated with funds transferred from the Associate Account mentioned below. 上述基本戶口的結餘 (扣除保留的金額) 如低於此水平, 將從下述的聯繫戶口內轉撥款項, 使結餘水平回復正常。</p> |
| <p>High Balance Level 高結餘水平 _____</p> | <p>When the credit balance (less holds) of the Primary Account mentioned above is HIGHER than this level, the surplus amount will be transferred to the Associate Account mentioned below. 上述基本戶口的結餘 (扣除保留的金額) 如高於此水平, 剩餘款項將轉撥下述的聯繫戶口。</p> |
| <p>Option 2 (To transfer surplus funds from the Primary Account) 選擇二 (將基本戶口的剩餘款項轉賬)</p> | |
| <p>High Balance Level 高結餘水平 _____</p> | <p>The Transfer Amount mentioned below will be transferred if the credit balance (less holds) of the Primary Account mentioned above is HIGHER than this level. 上述基本戶口的結餘 (扣除保留的金額) 如高於此水平, 下述的轉賬金額將予轉賬。</p> |
| <p>Transfer Amount 轉賬金額</p> <p><input type="checkbox"/> a fixed sum of (please specify Currency and Amount) 固定款項 (請註明貨幣及金額) _____</p> <p>Or <input type="checkbox"/> the credit balance (less holds) of the Primary Account LESS a *retention amount of 基本戶口的結餘 (扣除保留的金額) 扣除 _____ 保留金額*</p> <p>* Amount must be in the same currency as the Primary Account stated in box 1 above. 款項所用貨幣必須與方格一所述基本戶口的貨幣相同。</p> | |

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| <p>7. Associate Account Number 聯繫戶口號碼</p> | <p>8. Account Name 戶口名稱</p> |
| <p>9. Is an advice of each transfer required by the Primary Account Holder? 基本戶口持有人是否要求每次轉賬均有通知書?</p> <p><input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否</p> | |

10. Payment Narrative 付款摘要 (which will appear on each party's statement and/or advice respectively 將分別列印於各方的結單及 / 或通知書上)

Primary Account Holder
基本戶口持有人

Beneficiary
受款人

Declarations 聲明

1. I/We understand that any charges levied (commission, postage and stamp duty) will be debited to my/our account (Primary Account) mentioned above.
本人(等)明白一切費用(佣金、郵費及印花稅)將於本人(等)的上述戶口支取。
2. I/We confirm that if the instruction specified above is inactive for a period to be advised by the Bank, the Bank has my/our permission to terminate the instruction under notification to me/us.
本人(等)證實如上述常行指示連續 12 個月停用，貴行獲准在通知本人(等)的情況下終止本指示。
3. I/We understand that the Bank accepts no responsibility, to the fullest extent permitted by applicable law, for any loss or delay which may occur in the transfer, transmission and/or application of funds and I/we agree to indemnify the Bank against any actions, proceedings, claims or demands that may arise in connection with such loss or delay.
本人(等)明白如在資金轉賬、傳送及 / 或應用的過程中出現任何遺失或延誤的情況，貴行在適用法律許可的範圍內均毋須負責任；本人(等)並同意就該等遺失、延誤、錯誤、遺漏、破損或誤解所引致的任何訴訟、法律程序、申索及/或要求賠償貴行的損失。

Name(s) 姓名 (in **Block Letters** 請用正楷)

Signature(s) 簽署

Contact Telephone Number 聯絡電話號碼

For Bank Use Only

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| Signature Verified and Prepared by Date: | Additional Information Priority <input type="text" value=""/> Commission <input type="text" value=""/> Postage <input type="text" value=""/> Stamp Duty <input type="text" value=""/> |
| Data Input Checked and Authorised by Date: | S/I Number <input type="text" value=""/> |