



通訊資料更改表格(個人客戶)

已輸入

分行號：012 /

客戶號：_____

請將此表格填妥後交回任何一間中國銀行(香港)有限公司(下稱「本行」)分行，表格內(I)至(IV)所列資料的更改將於本行收妥本表格(已經您妥為填寫和簽署)日期起 **4個工作天內或於下述較後的指定生效日期** 生效。

注意：

1. 除非另有安排，請以 **英文正楷** 填寫，在適用的方格填上 及填妥表格；如資料欠完整，本行有可能未能及時處理您的申請。
2. 此表格僅適用於本行(不適用於只持有單一支付賬戶的客戶)及/或中銀信用卡(國際)有限公司(下稱「中銀信用卡」)。
3. 如您是本行的私人銀行客戶，通訊地址的更改只適用於私人銀行賬戶之主要通訊地址，客戶如需更改其他通訊地址(如適用)，請聯絡您的私人銀行客戶經理辦理更改。

I. 客戶資料 (除生效日期欄位外，此部份必須填寫)	
客戶姓名	<input type="text"/>
身份證明文件	<input type="checkbox"/> 香港身份證 <input type="checkbox"/> 內地居民身份證 <input type="checkbox"/> 護照 <input type="checkbox"/> 其他(請註明)：_____ 證件號碼： <input type="text"/>
生效日期	按上述本行處理時間生效；或 指定日期，請註明(年/月/日)，以較後者為準： <input type="text"/>
適用範圍 【只供填選一項，否則需另行索取表格及填寫】	<input type="checkbox"/> 所有個人 於本行、「中銀信用卡」(如適用) 及「中銀人壽」(如適用)內的賬戶/服務 <input type="checkbox"/> 所有個人及聯名(單簽有效) 於本行、「中銀信用卡」(如適用) 及「中銀人壽」(如適用)內的賬戶/服務 指定 於本行內的賬戶或服務 (若為多式簽署賬戶，需由全體戶主簽署確認，請註明：) 賬戶號碼： <input type="text"/> <input type="checkbox"/> 只適用於此賬戶 (只適用於更改通訊地址) <input type="checkbox"/> 適用於與此賬戶持有人相同的賬戶及服務

II. 更改地址 (如無別選，本行將預設您只更改通訊地址。如現居地址、長期居留地址及/或通訊地址均不相同，請分開表格填寫。) 聯名戶地址修改只適用於通訊地址	
地址類別	<input type="checkbox"/> 所有地址 或 <input type="checkbox"/> 現居地址(不接受郵政信箱) 或 <input type="checkbox"/> 長期居留地址(不接受郵政信箱) 或 <input type="checkbox"/> 通訊地址
新地址 第一部份	香港地址 <input type="text"/>
	地區 <input type="checkbox"/> 香港島 <input type="checkbox"/> 九龍 <input type="checkbox"/> 新界 <input type="checkbox"/> 香港以外地區(請填第二部份資料)

請轉下頁

新地址 第二部份 【香港以外地區 地址適用】	縣/市												
	省												
	國家/地區							郵政編碼					

III. 更改聯絡電話及電郵地址 (如屬本地電話號碼，毋須填寫國家/區域編號碼及地區編號)			
類別	國家/區域編號	地區編號	電話號碼
住宅電話號碼			
公司電話號碼			
流動電話號碼			
其他電話號碼			
傳真號碼			
電郵地址			

IV. 刪除聯絡電話及電郵地址		
<input type="checkbox"/> 住宅電話號碼	<input type="checkbox"/> 公司電話號碼	<input type="checkbox"/> 流動電話號碼
<input type="checkbox"/> 其他電話號碼	<input type="checkbox"/> 傳真號碼	<input type="checkbox"/> 電郵地址

接收推廣訊息指示 (以下部份取代任何您之前已告知本行及中銀信用卡(如適用)的選擇)

本人不欲 貴行及中銀信用卡使用本人的個人資料經以下渠道作直銷推廣 (請以“☒”選擇渠道)：

電子渠道 郵件 專人電話

如您沒有在以上任何方格內以“☒”顯示您的選擇，即代表您並不拒絕本行及中銀信用卡任何形式的直銷推廣。

為改善及提供更全面的服務予客戶，本行及中銀信用卡可能會將您的個人資料提供予「本集團」*其他成員及其他人作其包括財務、保險、信用卡、證券、商品、投資、銀行及相關服務和產品及授信的直銷推廣。若您不欲本行及中銀信用卡提供您的個人資料予以上人士作以上用途，請您在這方格以“☒”表示。

*「本集團」指本行及其控股公司、分行、附屬公司、代表辦事處及附屬成員，不論其所在地。附屬成員包括本行的控股公司之分行、附屬公司、代表辦事處及附屬成員，不論其所在地。

以上代表您現在對是否接收直銷推廣資料，以及對本行及中銀信用卡擬將您個人資料提供予「本集團」*其他成員作其直銷推廣的選擇，亦取代任何您之前已告知本行及中銀信用卡的選擇。請注意，您以上的選擇適用於根據本行及中銀信用卡的「資料政策通告」上所載的產品、服務及/或標的類別的直銷推廣。請您參考該通告上以得知在直銷推廣上可使用的個人資料的種類，以及您的個人資料可提供予甚麼類別的人士以供該等人士在直銷推廣中使用。

客戶聲明：

- 本人確認除更改上述資料外，本人其他留存於 貴行的資料不變；另外，本人明白上述資料可用於 貴行的「資料政策通告」內所述的目的，本人可循 貴行的「資料政策通告」或 貴行及其相關機構不時以任何名稱發出的有關個人資料的使用、披露及轉移的一般政策的其他文件，以了解相關內容。
- 對於有關中銀信用卡及「中銀人壽」所有賬戶資料的更改(如適用)，本人同意 貴行將收集的資料及此表格轉送中銀信用卡(國際)有限公司及中銀集團人壽保險有限公司作賬戶資料更新之用。

客戶簽署：

(請於下列方格內簽署，授權簽署須與本行留存紀錄相符；如涉及聯名戶，請依照相關簽署安排)

For Bank Use Only	
Checked	<input checked="" type="checkbox"/> S.V. <input type="checkbox"/> I.V.
Staff ID	
Handled by	

日期：_____

* For English version of "Contact Information Amendment Form (Personal Customer)", please download the document from our website (<http://www.bochk.com>)





Contact Information Amendment Form (Personal Customer)

Inputted
 Bank/Branch : 012 /
 Customer No. : _____

Please complete and deliver this application form to any branch of Bank of China (Hong Kong) Limited ("the Bank"). The amendments specified in sections (I) to (IV) of this form shall take effect within 4 working days after this form has been duly completed and signed by you and properly received by the Bank or on a later date specified as Effective Date in section I below.

Notes :

1. Unless otherwise stated, please complete in **BLOCK** letters, cross the relevant boxes with "☒". If the information provided is incomplete, the application may not be processed in time.
2. This form is only applicable to the Bank (not applicable to customer holding Payment Account only) and/or BOC Credit Card (International) Limited ("BOC Credit Card").
3. If you are our Private Banking customer, change of correspondence address only applied to the primary correspondence address of your Private Banking account. To change additional correspondence address (es), if any, please contact your Private Banking relationship manager.

I. Customer's Information (Mandatory section)	
Customer's Name	<input type="text"/>
Identification Document	<input type="checkbox"/> Hong Kong ID Card <input type="checkbox"/> Mainland Resident ID Card <input type="checkbox"/> Passport <input type="checkbox"/> Others (Please specify): _____ Identification No. : <input type="text"/>
Effective Date	With effect from our processing time ; or specific date · please specify(YYYY / MM / DD): <input type="text"/> / <input type="text"/> / <input type="text"/>
Applicable to [Please "☒" either one Only, and fill other form for more than one option]	<input type="checkbox"/> All individual accounts/services maintained in "the Bank" , "BOC Credit Card" (if applicable) & "BOC Life" (if applicable) <input type="checkbox"/> All individual & Joint(either-to-sign) accounts/services maintained in "the Bank" , "BOC Credit Card" (if applicable) & "BOC Life" (if applicable) <input checked="" type="checkbox"/> Specific account or service maintained in "the Bank" (For all-to-sign joint account, please sign with all account holders, please specify :) Account No. : <input type="text"/> <input type="checkbox"/> Specific A/C (Mailing address ONLY) <input type="checkbox"/> All Specific A/C name accounts/services

II. Change of Address (Please fill in a separate form if permanent and mailing addresses are different. Only mailing address will be amended if no option is made or Joint accounts)	
Category	<input type="checkbox"/> All address Or <input type="checkbox"/> Residential (P.O. box not accepted) Or <input type="checkbox"/> Permanent (P.O. box not accepted) Or <input type="checkbox"/> Mailing
New address [Part One]	Hong Kong address
	District
<input type="checkbox"/> HK <input type="checkbox"/> KLN <input type="checkbox"/> N.T. <input type="checkbox"/> Outside Hong Kong address(Please go to Part two)	

Please turn to next page

New address 【Part Two】 【Outside Hong Kong address applicable】	County													
	City													
	Country/Region							Postal Code						

III. Change of Contact Number & E-mail (For local phone no, not required to fill in country/region code & area code)			
Category	Country/Region Code	Area Code	Phone No.
Residential No.			
Company No.			
Mobile No.			
Other No.			
Fax No.			
E-mail			

IV. Deleting Contact Number & E-mail		
<input type="checkbox"/> Residential No.	<input type="checkbox"/> Company No.	<input type="checkbox"/> Mobile No.
<input type="checkbox"/> Other No.	<input type="checkbox"/> Fax No.	<input type="checkbox"/> E-mail

Direct Marketing Material Receiving Instruction (Below replace any previous choice communicated by you to “the Bank” and “BOC Credit Card” (if applicable))

I **do not wish** the Bank and BOC Credit Card to use my personal data in direct marketing via the following channel(s)(please use “☑” to select the channel(s)) :

Electronic Channels Mail Personal Call

If you return this Form without crossing any of the above boxes, it means that you **do not wish** to opt-out from any form of the Bank and BOC Credit Card's direct marketing.

To improve and provide more comprehensive services to our customers, the Bank and BOC Credit Card may provide your personal data to other members of the Group* and any other persons for their use in direct marketing of financial, insurance, credit card, securities, commodities, investment, banking and related services and products and facilities and so forth. Please cross the box with “☑” if you **do not wish** the Bank and BOC Credit Card to provide your personal data to the above persons for the above purposes.

*The “Group” means the Bank and its holding companies, branches, subsidiaries, representative offices and affiliates, wherever situated. Affiliates include branches, subsidiaries, representative offices and affiliates of the Bank's holding companies, wherever situated.

The above represents your present choice regarding whether or not to receive direct marketing materials, and the Bank and BOC Credit Card's intended provision of your personal data to other members of the Group* for their use in direct marketing. This replaces any choice communicated by you to the Bank and BOC Credit Card prior to this application. Please note that your above choice applies to the direct marketing of the classes of products, services and/or subjects as set out in the Bank and BOC Credit Card's Data Policy Notice. Please also refer to the said Notice on the kinds of personal data which may be used in direct marketing and the classes of persons to which your personal data may be provided for them to use in direct marketing.

Declarations:

- I confirm that save for the above amendments, all my other information being kept with the Bank remains unchanged. In addition, I acknowledge, the above information can be used for the purpose(s) mentioned in the Bank's "Data Policy Notice". I can refer to the Bank's "Data Policy Notice" or documents under other relevant headings from time to time issued by the Bank and its associate entities to understand the general policies on the use, disclosure and transfer of personal data to understand related content.
- Regarding to the changes of all account information for “BOC Credit Card” (if applicable) & “BOC Life” (if applicable), I agree to the Bank to transfer and deliver all information collected as well as this form to “BOC Credit Card” & “BOC Life” for updating the relevant information of all my relevant accounts.

Signature(s) :

(Please sign in the box below. Authorized signature(s) must comply with the bank's record; For joint account(s), please sign in accordance with relevant signing arrangement.)

--	--

For Bank Use Only	
Checked	<input checked="" type="checkbox"/> S.V. <input type="checkbox"/> I.V.
Staff ID	
Handled by	

Date : _____

*如欲索取「通訊資料更改表格(個人客戶)」中文版, 有關文件可於本行網頁下載 (<http://www.bochk.com>)

