

Reactivation of Dormant Account

重新啟動不動賬戶

To: Celestial Securities Limited / Celestial Commodities Limited

致:時富證券有限公司/時富商品有限公司

Please post your completed form to Client Services Department, 9/F, Low Block, Grand Millennium Plaza, 181 Queen's Road Central, Hong Kong or by visiting the Services Centres of CASH Financial Services Group. Your request will be processed within 2 working days upon receipt of the duly completed form. For inquiries, please do not hesitate to contact us at **(852) 2663 8888**. 請將已填妥的表格郵寄至**香港中環皇后大道中 181 號新紀元廣場低座九樓客戶服務部**或交回時富金融服務集團各服務中心。本公司將在收到填妥的表格後兩個工作天內處理您的申請。如欲查詢,請致電**(852) 2663 8888** 與客戶服務部聯絡。

Individual Accoun	ıt 個人賬戶									
	Nationali 國籍	·		Mobile 手提電話 () -			Home Te 住宅電記		
	☐ By En	ed Statement Delivery Methorali 電郵			Email Address 電郵地址					
Personal Information		ost to Correspondence Addre tial Address (Please attach a co			within t	the last 3 months)				
個人資料		住宅地址 (請提供最近三個月內之住址證明副本)								
		Correspondence Address (if different to residential address) 通訊地址 (如與住宅地址不同)								
Job Information	Employer	爯				siness Type 务類型			Position 職位	
受僱資料	Office Ac 辦事處地	.ddress 也址								
Financial Status	□ 0-120,	Annual Income (HKD) 年收入 (港幣) □ 0-120,000 □ 120,001 − 360,000 □ 360,001 − 600,000 □ 600,001 − 1,200,000 □ Above 高於 1,200,000								
財政狀況	_	Total Liquid Asset (HKD) 流動資產總值(港幣) □ Below 少於 1,000,000 □ 1,000,001 □ Above 高於 5,000,000								
Corporate Accoun	 nt 公司賬戶									
		Country of Incorporation 註冊成立國家			Nature of Business 業務類別					
		Registered Address 登記地址								
		Correspondence Address 通訊地址								
Corporate Information 公司資料	電郵地址	Email Address 電郵地址			Mobile 手提電話 () -			Office Tel 公司電話 ()-		
A 13211	Name of 董事名稱	Directors 再								
	最終股東	Name of Ultimate Shareholder 最終股東名稱						Percentag 權益百分	ge of Interest 分比	
	□ By Em	Combined Statement Delivery Method 綜合結算單遞送方法 □ By Email 電郵 □ By Post to Correspondence Address 郵寄至通訊地址								
Financial Status 財政狀況		Assets (HKD) 斊(港幣)				et Net Worth (HI 奎淨值(港幣)	KD)			
		he terms and conditions of tr 交易主要文件內的條款、個								
Client Signature(s)					Account No.					
客戶簽署	Please use th	Please use the signature(s) field with our company				戶口號碼				
Client Name 客戶名稱	請用留任中	本公司之印鑑式樣				Date 日期		day ∃ / mon	nth 月 / year 年	
						H /y-				
			For official v	use only 僅供職	战員填?	寫				
☐ Original ☐ Face to face		Phone verified by	Phone nun	ne number Date				Time		
Handled by		Verified by	Approved	by	—	Input by	Che	cked by	CDD Level Unchanged / Low / Normal /	

High