



Change of Client Name, ID / Passport No. or Signature

更改客戶名稱、身份證／護照號碼或簽署

To: Celestial Securities Limited / Celestial Commodities Limited / Celestial Finance Limited

致：時富證券有限公司／時富商品有限公司／時富財務有限公司

Please submit your completed form in person by visiting **Client Services Department, 22/F, Manhattan Place, 23 Wang Tai Road, Kowloon Bay, Hong Kong** or 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**. 請將已填妥的表格親身遞交至**香港九龍灣宏泰道 23 號 Manhattan Place 22 樓客戶服務部**或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。

I/We hereby notify you of changing my name:

本人／吾等謹此通知貴公司更改本人／吾等之名稱：

New Client Name 新客戶名稱	English 英文
	Chinese 中文
	For change of name to be registered in our records, please present an original Deed Poll and your new Identity Card or Passport to verify your identity. The new client name should be the same in Identity Card or Passport. 若需要更改客戶名稱，請出示改名契及新身份證或護照以核實閣下身份。新客戶名稱必須與身份證或護照上的相同。

I/We hereby notify you of changing my ID / Passport No.:

本人／吾等謹此通知貴公司更改本人／吾等之身份證／護照號碼：

New ID / Passport No. 新身份證／護照號碼	Place Of Issue 簽發地點
	Please present your previous and new Identity Card or Passport to verify your identity. Please arrange for authentication by notary public, solicitor or CPA if you cannot present your previous Identity Card or Passport or your ID / Passport no. changes after renewal. 請出示舊及新身份證或護照以核實閣下身份。如你未能出示舊身份證或護照或閣下身份證或護照續期後號碼變更，請安排公證人、律師或註冊會計師核實你的身份。

I/We hereby notify you of changing my signature specimen:

本人／吾等謹此通知貴公司更改本人／吾等之簽署式樣：

New Client Signature(s) 新客戶簽署		New Client Signature(s) 新客戶簽署	
Client Name 客戶名稱		Client Name 客戶名稱	
Total no. of signatories 簽名人數		No. of signatures required 所需之聯名簽名人數	

Client Signature(s) 客戶簽署	× Please use the signature(s) field with our company 請用留存本公司之印鑑式樣	Account No. 戶口號碼	
Client Name 客戶名稱	English 英文	Date 日期	day 日 / month 月 / year 年
	Chinese 中文		

For official use only 僅供職員填寫

<input type="checkbox"/> Original <input type="checkbox"/> Face to face	Handled by	Verified by	Approved by	Input by / scanned by	Checked by	CDD Level Unchanged / Low / Normal / High	<input type="checkbox"/> PEP YES / NO
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