表格 A3 Form

澳門特別行政區政府 Government of the Macao Special Administrative Region 社會保障基金 Social Security Fund



由社會保障基金填寫 FOR FSS USE ONLY 登記編號 Registration No

Sample

非強制性中央公積金制度基金管理實體更改資料申請表

Non-Mandatory Central Provident Fund System Application Form for the Fund Management Entity to Change Information

Nar 注意	金管理實體名稱: 甲退休基金管理有限公司 基金管理實體編號:
1	基金管理實體基本資料 BASIC INFORMATION OF FUND MANAGEMENT ENTITY
(須	與商業登記證明所載之商業名稱及法人住所一致)(It must match the business name and the legal person's place of residence
conta	nined in the business registration certificate)
	中文商業名稱:
	Business name in Chinese
Ш	葡文商業名稱:
	英文商業名稱:
	Business name in English 地址: □ 澳門
	地址: □ 澳門 ☑ 氹仔 □ 路環 Address Macao Taipa Coloane
S	街道 基馬拉斯大馬路 Street 大厦 名牌綜合大樓 座數 8 日東
	中積金/退休金主題網站:
2	收取政府管理子帳戶款項(由帳戶擁有人申請轉出)的銀行帳戶資料 INFORMATION OF THE BANK ACCOUNT FOR RECEIVING FUNDS FROM THE GOVERNMENT-MANAGED SUB-ACCOUNT (APPLIED BY THE ACCOUNT OWNER TO TRANSFER OUT THE FUNDS)
	銀行名稱:
	SOCIEDADE GESTORA DE FUNDOS DE 7 PEÑSO ES AVOA
	合法代表簽名及公司蓋章 Signature of legal representative and company chop
	2018 年 X 月 X 日 day month year 合法代表姓名: Name of legal representative (請用正階填寫) (Please write the name using BLOCK letters) OR DESCRIPTION OF THE PROPERTY OF
	須遞交文件 Documents Required to be Submitted
1	如更改商業名稱或地址,須褫交已更新及最近三個月內發出的商業登記證明;

社會保障基金 格式 FSS/PC-28 FSS Modelo FSS/PC-28

立的澳門幣銀行帳戶影印本。

To change the business name or address, the updated business registration certificate issued within the last three months must be submitted; 如更改收取政府管理子帳戶款項(由帳戶擁有人申請轉出)的銀行帳戶資料,須遞交以公司名義開

To change the information of the bank account for receiving funds from the government-managed sub-account (applied by the account

owner to transfer out the funds), a photocopy of the MOP bank account opened in the company name must be submitted.