Form B1

Government of the Macao Special Administrative Region **Social Security Fund**



FOR FSS USE ONLY	
Registration No Sample	Non-Mandatory Central Provident Fund System Application Form for the Employer to Establish a Joint Provident Fund Scheme for the First Time
Please use a """ to select the following options: Belong to the interface with a private pension prequired to submit documents 1 to 4 listed on the back of this Not belong to the interface with a private pension (required to submit documents 1 to 3 listed on the back of this	form) ion plan
Name of employer Note back of	e filling in this part, please refer to the notes on the of this form.
Chinese: 僱主有限公司 Portuguese: <u>COMPANHIA KU CHU LDA</u> English: <u>KU CHU COMPANY LIMITED</u>	
Employer's FSS registration no.: Business / association registration no.: Legal identity (Please see reverse side): Employer's FSS registration number, it is not required to fill in the Mailing address: Macao Taip (required to attach a photocopy of the Business Tax Declara been reported to the DSF) Street Rua de Eduardo Marques	80XXX (SO) In fill in "16" here, please spontation about this Scheme here
Building Employer Brand Commercial (Phone no.: 2888 XXXX	
	ES TO ALL OF THE LOCAL EMPLOYEES LISTED BELOW
Employer's FSS registration no. Registration no. of est 1. 1XXXXXXXX 2. . 3. . 4. . 5. .	tablishment Business name Fill in the information that applies to the same scheme ove format if necessary, giving the title heading "This Joint Provident Fund Scheme by the legal representative and affixed with company seal on each page.
NOTE : Please continue on a separate sheet (A4 paper) according to the abo	by the legal representative and affixed with company seal on each page.

3	FUND MANAGEMENT ENTITY	
	ne of fund management entity of oint provident fund scheme : <u>A PENS</u>	ION FUND MANAGEMENT COMPANY LIMITED
<u>In th</u>	e case of an interface, the following fi	elds must be filled in:
	ne of fund management entity e private pension plan : A PENSIO	N FUND MANAGEMENT COMPANY LIMITED
Priv	vate pension plan no. :XXXXX	XXXXX
		und can pass on the relevant information to other government izations or relevant individuals for verification purposes.
		KU CHU COMPANY CH AN 241 MUTED
		Signature of legal representative and company's seal
<u>202</u>	Queer V month V day	ame of legal representative: CHAN TAI MAN ease fill in using BLOCK letters

EMPLOYER'S LEC	GAL IDENTIT	Y CODE :			
01 Public enterprise	02 Individual business owner		03 Unlimited company		04 Limited partnership
05 Corporation	06 Limited co	ompany	12 Consortium/Fund		13 Association
15 Entity equivalent to a legal person 16 Other leg		16 Other legal	nature	17 One-person l	imited company

NOTE: It must match the business name/taxpayer name or company name on the DSF Business Tax Declaration Form for Business Registration (M/1). If it is an association, it must match the information stated in the statutes published in the Macao SAR Gazette.

Documents Required to be Submitted and the Points to Note

- 1. A photocopy of the joint provident fund scheme contract (a signed contract);
- 2. If it is a legal entity, it is required to submit the business registration certificate (issued within the last three months);

If it is an individual business owner, it is required to submit a photocopy of the proof of identity; If it is an association, it is required to submit:

- -a photocopy of the statutes published in the Macao SAR Gazette;
- -Certificate of Existence of Registration Record of Established Association in Identification Services Bureau (issued within the last three months);
- 3. Front and back photocopy of the DSF Business Tax Declaration Form for Business Commencement/ Change of Information (M/1); If it is an association or a market stall lessee, it is required to submit a photocopy of a document that can show the employer's DSF registration number (e.g. A photocopy of a certificate issued by the DSF, or a

photocopy of the DSF Salaries Tax Group I Registration Form (M/2) of any one of the employees);

- 4. A photocopy of the latest collective membership contract of the private pension plan (applies to the case of an interface);
- 5. Please note that the form and documents must be submitted through the fund management entity.