

Type of Account 帳戶類別	<input type="radio"/> Individual Cash Account 個人現金帳戶
	<input type="radio"/> Joint Cash Account 聯名現金帳戶
	<input type="radio"/> Corporate Account 公司現金帳戶
	-

To: **China International Securities Limited**  
806 K.Wah Centre, 191 Java Rd., North Point, HK

**THIRD PARTY AUTHORIZATION LETTER 第三者操作授權書**

I/We (the undersigned Client) hereby authorise the person (referred to hereunder as "Authorised Person") as described in the Authorised Person Information Table, to operate on my/our behalf the above account maintained with CIS in the name of me/us.

The Authorised Person shall have full authority to give instructions orally, by telephone, in writing or any other method; and to sign any documents, including but not limited to any stock purchases, sales, holding, settlement, transfer, deposit or withdrawal of monies (limited to withdrawal made to bank account(s) in the name of me/us), corporate actions and other transactions.

本人/吾等(以下簽署的客戶)特此授權列於下列獲授權人資料表內的人士(下稱為「獲授權人」)代表本人/吾等操作上述以本人/吾等名義於CIS開立之帳戶。獲授權人可全權代本人/吾等就上述帳戶,以口頭、電話、書面或其他方式發出指示,並簽署任何文件,包括但不限於任何股票交易、保管、交收、存款或提款(只限提款至本人/吾等名下之銀行帳戶)、企業行動指示及其他任何指示。

**Authorised Person Information Table 獲授權人資料表**

English Name 英文姓名	Mr/Mrs	中文姓名	先生/女士
ID/Passport No.* 身份證/護照號碼*		Date of Birth 出生日期	Year 年      Month 月      Day 日
Name of Employer 僱主名稱		Residential Tel 住宅電話	
Occupation 職業		Office Tel 辦公室電話	
Relationship with Client 與授權人之關係		Mobile Tel 手提電話	

Is the Authorised Person a registered person under the Securities and Futures Ordinance or an employee of any licensed corporation /registered institution registered under the Securities and Futures Ordinance?

獲授權人是否根據證券及期貨條例註冊之人士或受僱於任何根據證券及期貨條例註冊之持牌法團/註冊機構?

<input type="radio"/> No 否	<input type="radio"/> Yes, CE No. 對, 中央編號為 _____	Original copy of employer letter of consent must be submitted*. 必須出示僱主發出之同意信正本*
	<input type="radio"/> HKMA <input type="radio"/> SFC      Company Name 公司名稱	

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I/We agree that you may, at your absolute discretion, rely upon and act in accordance with any oral, telephone, written or any other method of instruction given or purported to be given by the Authorised Person(s) to you. I/We also agree that any such instructions shall be deemed to be my/our instructions and shall be binding on me/us.

I/We further agree to be fully responsible for any acts or omissions of the Authorised Person(s) and hereby keep you fully indemnified against all losses or damages which you may suffer or incur as a result of such acts or omissions.

I/We declare that the authorisation herein shall take effect from the date this Authorisation Letter is signed and shall remain in full force and effect for a period of 12 months from the effective date of this Authorisation Letter or until a written notice revoking this Authorisation Letter has been received by CIS from me/us, whichever is the earlier. I/We hereby undertake, upon demand from CIS from time to time, to ratify and confirm any instructions whatsoever given or purported to be given by the Authorised Person(s) for and on my/our behalf.

The authority under this Authorisation Letter shall be automatically renewed for a period of 12 months upon its expiry upon the same terms and conditions unless I/we inform you in writing my/our objection to renewal. CIS will send me/us a notice of renewal at least 14 days prior to the expiry of this Authorisation Letter.

本人 / 吾等同意，貴公司有絕對酌情權，依賴及依從獲授權人發出的或看似由獲授權人發出的任何口頭、電話、書面指示及其他方式進行交易。本人 / 吾等亦同意，所有此等指示均須視作等同本人 / 吾等之指示，並對本人 / 吾等具有約束效力。本人 / 吾等進一步同意對獲授權人之作為負全責，並就貴公司可能因此蒙受或承擔之損失或損害，作出全數彌補。本人 / 吾等聲明，本授權書生效日期為下述之客戶簽署日期，並直至該生效日期起十二個月屆滿或貴公司收到本人 / 吾等撤銷本授權書之書面通知為止，以較早發生者為準，本授權書將繼續具有全面法律效力和作用。本人 / 吾等特此承諾，應貴公司在此段時間不時及任何時候提出之要求，追認及確認獲授權人為及代本人 / 吾等發出或看似由獲授權人為及本人 / 吾等發出之任何指示。在本授權書有效期屆滿前14天，貴公司可向本人 / 吾等以書面方式發出續期通知，除非本人 / 吾等提出書面反對，本授權書在屆滿時將自動按相同條款及條件予以續期12個月。

Client's Signature 客戶簽署

Authorised Person's Signature 獲授權人簽署

Name of Client  
客戶名稱：Name of  
Authorised  
Person  
獲授權人名稱：Date  
簽署日期：

Year 年      Month 月      Day 日

Date  
簽署日期：

Year 年      Month 月      Day 日

\* A copy of the Authorised Person's identity card / passport and original copy of letter of consent issued by employer of the authorised person (if applicable) should be submitted together with this authorisation letter.

\* 請隨本授權書附上授權人之身份證 / 護照副本及獲授權人僱主發出之同意信正本 (如適用)。

**\*\*\* RISK DISCLOSURE STATEMENT \*\*\***

1. This is an IMPORTANT document. By appointing the person herein stated as your Authorised Person to act on your behalf, you should be aware that the person so authorised is acting as your agent. Such authorisation gives rise to certain risks and legal consequences of which you should be aware and prepared to accept.
2. Please DO NOT sign this letter of authorisation if you have not been informed of or do not fully understand the consequences of signing this letter. You are advised to obtain competent legal advice of your rights, obligations and remedies under this letter and to clarify any doubts which you may have before signing this letter.

**\*\*\* 風險披露聲明 \*\*\***

1. 這是一份重要文件。你應該明白，當你指派上述人士以你的獲授權人身份代辦事情，該名獲授權人將會成為你的代理人。你更應該明白此等授權會有機會引致若干風險和法律後果，你應該預備承擔這一切風險及後果。
2. 倘若你未知識或不完全明白簽署本授權書之後果，請你不要簽署這份文件。你應該先就你在本文件下享有的權利，義務和彌償方法，取得足夠的法律意見，並澄清所有疑問之後，才簽署本文件。

**CIS WITNESS SIGNATURE 見證人**

I, the undersigned, a representative from CIS, hereby confirm as witness, the signatures of the Client and the Authorised Person.

本人(以下簽署人士)乃 CIS 的代表，現確認見證客戶及獲授權人的簽署。

Name of Witness  
見證人姓名

Witness Signature 見證人簽署

Contact  
聯絡**For Official Use Only 只供本行使用**

Submitted by 遞交人	Signature Verified by 簽署核對	Approved by 批核	Data Entry by 資料輸入	Checked by 資料核對
Date 日期	Date 日期	Date 日期	Date 日期	Date 日期