National Australia Bank
澳洲銀行

Notice of Authority
Personal Account/Trust Account

The "Bank" in this form means National Australia Bank Limited, Hong Kong Branch.
"I/We" in this form means the Account Holder or (in the case of a joint account) each Account Holder.

Account number: Name of Account :

☐ New Account ☐ Update/change of signature records and/or signing arrangement

Name of Account Holder (and Primary Account Holder For Joint Account):

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ other: Chinese Name:

Surname, Given Name

HK ID Card No.: Date of Birth (dd/mm/yyyy): / /

Passport No.:

Name of Joint Account Holder (if applicable):

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ other: Chinese Name:

Surname, Given Name

HK ID Card No.: Date of Birth (dd/mm/yyyy): / /

Passport No.:

☐ **Name of Joint Account Holder** ☐ **Name of Authorised Person (if applicable):**

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ other: Chinese Name:

Surname, Given Name

HK ID Card No.: Date of Birth (dd/mm/yyyy): / /

Passport No.:

☐ **Name of Joint Account Holder** ☐ **Name of Authorised Person (if applicable):**

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ other: Chinese Name:

Surname, Given Name

HK ID Card No.: Date of Birth (dd/mm/yyyy): / /

Passport No.:

For Trust Accounts:

The Above Account Holder/Joint Account Holder is acting as trustee: ☐ Yes ☐ No

Details of Beneficiary/ies – Beneficiaries to also complete Information Form (Personal or Corporate, as appropriate):

☐ Individuals (Names of Beneficiaries)

☐ Corporate Beneficiary (Company Name)

☐ Discretionary Trust

Name of Settlor – Settlor to also complete Information Form (Personal or Corporate, as appropriate):

Relationship between the Settlor, the Trustee(s) and the Beneficiary(ies) :

Nature of the Trust (please provide a copy of the Trust Deed (if any)) :

TO THE BANK:

I/We authorise and request the Bank to open and maintain one or more accounts in my/our name with the Bank from time to time (the "Account(s)").

I/We authorise and request the Bank to comply with all instructions given by my/us and/or any other person named above (collectively the "Authorised Person(s)") in connection with the Account(s) including, without limitation, instructions relating to the following matters, provided that such instructions are signed by the Authorised Person(s) in the manner set out in the "Signing Arrangement" section in this form:

- Sign, draw, make, accept, endorse or discount cheques, drafts, bills of exchange, promissory notes or other payment orders or instruments, or make withdrawals, whether the relevant Account(s) is in credit or is overdrawn or may become overdrawn provided that the amount overdrawn is within the limit permitted by the Bank.
- Purchase negotiable or convertible certificates of deposit, or place money on term or other deposits with the Bank and renew, rollover or terminate such deposits.
- Make arrangements with the Bank regarding cheques, withdrawals, bill of exchange, bank cheques, night safes, periodical payments, debit authorisation, or other payment orders or instruments and electronic banking services.
- Give all or any instructions to the Bank necessary for the operation of any of the Account(s).
- Close all or any of the Account(s).

In the absence of any instructions from the Authorised Person(s) to the contrary, any account(s) opened after the date of this Notice of Authority in my/our name shall be operated and dealt with upon the terms set out in this Notice of Authority insofar as they are applicable.

The Bank's "Terms and Conditions for Deposit Accounts" and (in the case of Renminbi accounts or services) the "Additional Terms and Conditions – Call Deposit Accounts and Term Deposit Accounts Denominated in Renminbi Currency" in force from time to time shall govern the Account(s). I / We have received, read and understood the "Terms and Conditions for Deposit Accounts" and "Additional Terms and Conditions – Call Deposit Accounts and Term Deposit Accounts Denominated in Renminbi Currency" currently in force and agree to be bound by them. The account relationship between I/we and the Bank and the Bank's obligations to pay any amount standing to the credit of any Account(s) shall be governed by the law of the Hong Kong Special Administrative Region of the People's Republic of China ("Hong Kong"). I/We submit to the non-exclusive jurisdiction of the Hong Kong Courts.

(Where the Account Holder acts as a trustee) I/We declare and warrant that I am/we are empowered by the relevant trust deed to open the Account(s) and give you the instructions set out and/or contemplated by this form in my/our capacity as trustee, and that I/we have taken all necessary action, obtained all necessary consent or approval, and completed all necessary procedures for the purposes of opening the Account(s) and signing this form.

Signing Arrangement:

Personal Account(s)

- ☐ The Account Holder to sign solely
- ☐ Any one of the Authorised Person(s) other than the Account Holder to sign solely
- ☐ The Account Holder and any one of the Authorised Person(s) other than the Account Holder to sign jointly
- ☐ Other – please state:

Joint Account(s)

- ☐ Any one of the Account Holder(s) to sign solely
- ☐ All Account Holder(s) to sign jointly
- ☐ Any one of the Authorised Person(s) other than an Account Holder to sign solely
- ☐ Any one of the Account Holder(s) and any one of the Authorised Person(s) other than an Account Holder to sign jointly
- ☐ Other – please state:

I/We shall notify the Bank in writing of all changes to any of the Authorised Person(s) and/or the Signing Arrangement set out in this Notice of Authority. All changes notified to the Bank must be signed by all the Account Holder(s).

Mailing Address:

Note: The prerequisite of maintaining a mailing address for the receipt of and notices is a valid residential address supported by required proofs.

Complete by ticking in the appropriate boxes.

- ☐ I/We acknowledge that from time to time you may send me/us information about your services which may include special offers and promotion.
- ☐ I/We do not wish to receive any marketing materials. Should I/we choose to receive any marketing materials in the future, I /we will contact my/our Partner or call you at 2826 8111.
- ☐ I/We give consent to the Bank to access and utilise my/our deposit information for investment purposes.

Draw a line through signature boxes if not utilised, if more than 4 persons use additional forms

Specimen Signature Box:

Name:

Date:

Specimen Signature Box:

Name:

Date:

Specimen Signature Box:

Name:

Date:

Specimen Signature Box:

Name:

Date:

Internal Use Only:

Signature witnessed by:

Name of Bank Officer:

Information entered by:

Checked by:

All documentation scanned by:

Checked by:

Remarks:

(01 AUG 05)