

Hong Kong Confederation of Insurance Brokers
香港保險顧問聯會

APPLICATION FOR PARTICULARS OF REGISTRATION
申請註冊事項證明書

Particulars of the Applicant 申請人資料

Name in English 姓名(英文)				
	姓氏(Surname)	名字(Other name)		
HKID Card No. 香港身份證號碼		Reg No. 註冊號碼		Contact Phone No. 聯絡電話號碼

I apply for a letter confirming particulars of my registration as a Chief Executive or a Technical Representative with the Confederation. I pay herewith the prescribed fee as set out in the Fee Schedule of the Confederation for this record.*

本人申請一份書面證明，以資證明本人在聯會註冊為行政總裁或業務代表之註冊事項。本人按聯會費用表所訂，繳付相關費用。*

Collection Method (Please tick the appropriate box)

領取方法 (請剔選適當方格)

- I will collect it in person. 本人親身到秘書處領取。
- Please send by ordinary post to the following address. 以平郵方式郵寄至下列地址。

- I authorize _____ (Name), holder of ID Card No. _____ (姓名), 身份證號碼 _____ to collect on my behalf. 代為領取。

_____/_____/_____
Date 日期

Signature of applicant 申請人簽署

***Payment Method 繳費方法**

- (a) The Fee Schedule is available at the Download Corner of the CIB website 收費表載於聯會網址下載區: www.hkcib.org.
 (b) Crossed cheque payable to "The Hong Kong Confederation of Insurance Brokers". 劃線支票, 抬頭寫上「香港保險顧問聯會」。
 (c) Cash at the CIB counter (please pay in exact tender) 以現金於秘書處繳交(不設找續)#.

If the application is submitted in person over the counter with cash payment, the particular of registration will be available for collection at the CIB counter as follows:

- (1) submitted by or before 12:00 noon, available for collection after 3:00pm of the same Business Day;
 (2) submitted after 12:00 noon, available for collection after 10:00am of the next Business Day;
 The CIB office hours are Monday to Friday 8:30am to 5:30pm, lunch break 12:30pm to 1:30pm, public holidays closed.

*如申請人親身到秘書處申請並以現金付款，註冊證明可按下列時間於秘書處領取：

- (1) 在中午 12 時或之前遞交，於同日下午 3 時後可領取；
 (2) 在中午 12 時後遞交，於下一個工作日的上午 10 時後可領取；
 聯會辦公時間為星期一至星期五早上 8:30 至下午 5:30，午膳時間下午 12:30 至 1:30，公眾假期休息。

For Office Use Only				
Identity Verification	Verified by	Date/Time	/ / , :	
a. Apply in person	<input type="checkbox"/> Yes, to (b)	Cash payment	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> No, to (c)	Cheque No.		
b. HKID check, OK?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Payment Cleared		
c. Signature check, OK?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Receipt no.		