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## APPLICATION FORM FOR COMMERCIAL SERVICES

| 1. Client Information  |                   |                  |        |           |
|--|-------------------|------------------|--------|-----------|
| Company Name:  |                   | (English)        |        | (Chinese) |
| Registered Address: (English)                                    |                   |                  |        |           |
| Tel. No.:  | Fax No.:          |                  | Email: |           |
| BR No.:  |                   | Business Nature: |        |           |
| Contact Person:  |                   | (English)        |        | (Chinese) |
| Address:   |                   |                  |        |           |
| Tel. No.:  | Fax No.:          |                  | Email: |           |
| 2. Registered Office & Mail Col  Take our address as the company |                   | & 2)             |        |           |
| Registered Office address  | <b>.</b>          |                  |        |           |
| ☐ Branch Office address  |                   |                  |        |           |
| Correspondence address   |                   |                  |        |           |
| Mail Collection centre:  | ral Mongkok       | ☐Kwun Tong       |        |           |
| Special Instructions:  |                   |                  |        |           |
| Effective date   |                   |                  |        |           |
| 3. Telephone & Fax Services (Not                                 | e 3 & 4)          |                  |        |           |
| Special Instructions:  |                   |                  |        |           |
| ☐ Please answer telephone calls                                  | with company name |                  |        |           |
| ☐ Please transfer calls to this no                               |                   |                  |        |           |
| ☐ Please transmit fax to this fax                                | no.               | ; or             |        |           |
| Please transmit fax to this em                                   | ail account       |                  |        |           |
| Other instructions   |                   |                  |        |           |
| Effective date   |                   |                  |        |           |

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| 4. Beneficial Owner   |  |                                     |
|---|--|-------------------------------------|
| Please provide the names of ultimate be                       | neficial owner(s) of the company   |                                     |
| Name:   | (English)  | (Chinese)                           |
| ID/Passport/Co. No.:  | Issuing Country:   |                                     |
| Residential/Registered Address (English):                     |  |                                     |
| Note: Copy of the identification document and add form to us. | lress proof of all directors, shareholders and beneficial owner is require | ed when submitting this application |
| 5. <u>Detailed Nature of Activities of Enti</u>               | <u>ty</u>  |                                     |
| 6. Geographic Location of Business Ac                         | <u>ctivities</u>   |                                     |
| 7. Source of Funds (Beneficial Owners                         | <u>s)</u>  |                                     |
| ☐ Public Listings   | Personal Assets of Beneficial Owner  | r                                   |
| ☐ Borrowings/Loans  | ☐ Others (please specify)  |                                     |
| 8. Declaration  |  |                                     |
| ·   | ation we/I have given in this application is true and con                  | _                                   |
| accessible at website www.cmassl.com.h                        |  | •                                   |
|   | _  |                                     |
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|   |  |                                     |
|   | <u> </u>   |                                     |

## Notes:

Date

- 1. Mails are only limited to letters and small parcels (not exceeding 21 x 16 x 9 cm<sup>3</sup> and 3 kg).
- 2. If the mail / parcel do not be collected after 3 months from the date which we inform the client, we have the right to demolish the mail / parcel without further notice.

Signature and company chop

- 3. Include 50 pages of incoming fax. Each additional page will be charged at HK\$0.5.
- 4. Telephone service will be provided at working hours: Mon. Fri. 9:00 a.m. to 5:45 p.m. and no service will be provided on Saturday, Sunday & Public Holiday. Subject to change without further notice.

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