## HONG KONG SECURITIES CLEARING COMPANY LIMITED

## REQUEST FOR BACK-UP FACILITIES FORM

To: Customer Service Centre				Date:	
1/F, One & Two Exchange Square, 8 Connaught	Place, Central, Hong Kor	ng			
Participant ID :					
•					
Participant Name :					
Reason For Use					
Reason For Use					
			-		
Date of Use Name of Authorized User	I.D. Card #	Time In	Time Out	Terminal # Used	
			_	_	
For and on behalf of					
For and on benan or					
Authorized Cianatura (with company short ONLY	_				
Authorised Signature (with company chop, ONLY applicable if it forms part of your signing instruction)					
	For O	ffice Use only			
Signature Verified by	Virus Scanned by :		Approved	Approved by	