

Change of Company Name Form (For HKSCC Non-Investor Participants / Designated Banks & HKCC / SEOCH Participants)

Your request will normally be processed in five working days upon receipt of your form. Upon completion, relevant clearing house will confirm you the effective date of the changes by phone or email.

To: Clearing Participant Admin. & Services Clearing Operations 30/F, One Exchange Square, 8 Connaught Place, Central, Hong Kong CCASS Hotline: 2979-7111 DCASS Hotline: 2979-7222		From: (Full Name) Please tick "\" in appropriate box and fill in ID/code. HKSCC Participant Designated Bank Participant or Bank ID: HKCC Participant SEOCH Participant DCASS Customer Code:						
	(Contact Person)		(Tel No.)		(Email)			
Det	tails of Change							
1.	New Company Name as shown on the Certificate of Change of Name issued by the Companies Registry of Hong Kong <u>or</u> Business Registration Certificate <u>or</u> such other equivalent document. Please submit a certified true copy of such certificate or document together with this form.							
In English:								
	In Chinese (Pleas	se state "N.A." if not a	pplicable):					
		For HKSCC Only				OCH &/or HKCC		
2.	New Short Name in	English:		New S	Short Name in English:	<u></u>		
	(not more than 15 alphanumeric characters) The Short Name will be shown on all the CCASS/CCMS, term			(not more than 20 alphanumeric characters.) all screens and reports. Please avoid using initials of your company name.				
3.		New Bank Account Name: New Bank Account Name:						
	Same as New Co	bove Same as New Company Name in 1. above						
	You must inform your Designated Bank/ Settlement Bank separately to update its record regarding the name change before agreeing the Effective Date with HKSCC/ SEOCH/ HKCC.							
Company Chop Requirement (see footnote * below): Please affix Specimen of New Company						w Company Chop	below if required.	
	□ No							
	Yes							
	Authorised Signature(s) with company chop, ONL	LY applicable if it forms	part of your signine	g instruc	Name of Sig	gnatories	Date	
				Office Us		1. 1=0	_	
	ate Received:		Part. Master Input & Dbase Updated by:		Alt Diff Designated Bank (USD / CNY) Updated by:	Agreed Effecti Confirmed with		
Pr	rocessed & Diary Updated	Reviewed by:	Maker: Checke Report Checked by:		Maker: Checker: Report Checked by:	Form	Form	
by		Date:	Date:		Date:	Scanned by:	Verified by:	
	Pate: mailed to CCRM/CDCO-C&	S/DNS-Depo/	Emailed to CT-PS b		Company Chop	Date:		
	CDCO-OSSA by: Date:		Date:		Scanned by: Verified by:			