



ZUU Digital Financial Services Limited
資遇數字金融服務有限公司

MPF BUSINESS RECORD FORM

Transfer In	<input type="checkbox"/> Yes #
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Client Information				
Name	<input type="checkbox"/> Mr.	English	Nationality	<input type="checkbox"/> HK <input type="checkbox"/> Others
	<input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss			<input type="checkbox"/> Yes # <input type="checkbox"/> No *
		Chinese	New Client	

Policy Information			
Insurer		Product Provider	
Policy No.		Product Name	

Checklist for **NEW** client:

- ☐ Certified true copy of identity document
- ☐ Certified true copy of address proof
- ☐ Client Agreement
- ☐ MPF Client Confirmation Form
- ☐ MPF Suitability Assessment Form

Whole set of documents will be returned if any items are missing.

Licensed Technical Representative		
(Staff Number:)		(DD/MM/YYYY)
Name of Technical Representative	Signature of Technical Representative	Date

Writing	
Principal:	
Secondary:	
Name of Advisor	

Direct Upline		
		(DD/MM/YYYY)
Name of Direct Upline	Signature of Direct Upline	Date

Remark: