CNI Global Assets Management Limited 中國北方環球資產管理有限公司

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Re: Third party authorization to operate account 有關授權第三者操作帳戶事宜

I/We hereby appoint CNI Global Assets Management Ltd. (I.D. No._____) to operate my/our account (Account No._____) of your company on my/our behalf

本人/吾等現授權_____(身份證號碼:_____) 代表本人/吾等處理在貴公司開立之帳戶(帳戶編號:_____)。

Contact Information of authorized person 被授權人聯絡資料

Name of authorized person **被授權人姓名**	(English) (英文)	(Chinese) (中文)
Contact No. of authorized person **被授權人聯絡電話**		
Address of authorized person **被授權人聯絡住址**		

Authorized person information: 被授權人資料：

(1)SFC Licensed person 香港證券及期貨事務監察委員會的持牌人士? YES **是 口 NO 否 口**

(2)SFC Licensed Corporation's employee 香港證券及期貨事務監察委員會的持牌人士之僱員? YES **是 口 NO 否 口**

(Note 注意：If your answer is YES, please send us the consent of your employer. 如你的答案 "是" 請提供你所屬僱主的同意書。

The above authorization becomes effective immediately and the coverage of the authorization includes:

(Put a "√"for applicable items and a" X "for non-applicable ones)

本人/吾等要求貴公司批准上述人士自即日起代理本人/吾等於上述戶口內進行以下的相關事項:

(請於適用處加上"√", 不適用處加上" X ")

☐ Telephone Dealing 電話指示落盤

☐ Enquiry of Account Balance 查詢帳戶結餘

☐ Withdrawal of Account Balance 提取帳戶結餘

☐ Transfer Account Balance To Securities Account 轉帳帳戶結餘到證券帳戶

☐ Exchange Account Balance into any other currency(ies). 將帳戶結餘兌換至任何貨幣

Authorized Person's Signature: 被授權人簽署式樣 :	

Required Documents 所須文件： Copy of the identity cards of authorized person 被授權人士之身分證副本

I/We Understand:

本人/吾等明白：

1. The above authorization is valid for a period of 12 months from the date hereof.
   此安排由簽署起計十二個月內有效。

2. I may not be able to detect any anomalies and mistakes in my account with this authorization. I hereby declare that I am Responsible for all transactions, loss, cost and expenses due to the authorization and undertake all risks of manipulation of account and inappropriate dealings.
   本人/吾等將可能因上述之授權而未能即時察覺帳戶內任何差異或錯誤而引致損失或責任， 本人/吾等就此同意承擔該等情況下所產生的任何風險及責任。

3. You can amend or terminate the above authorization without my consent or giving any notification. However, I/We can also terminate the above authorization any time by tendering 7 days written notice to our company.
   貴公司可無須向本人/吾等發出通知或事先取得本人/吾等同意，而對上述安排作出任何變更或撤銷。但是，本人/吾等亦有權向貴公司發出七個營業日的通知而撤銷本項安排。

4. Unless we receive your written objection on such authorization before the expiry date, it will be renewed for further 12 months.
   如本公司在到期日前，還未收到閣下之書面反對通知，該授權書將自動續期 12 個月。

Name of Account Holder(s) 帳戶持有人姓名	Signature of Account Holder(s) & company chop (if applicable) 帳戶持有人簽署及公司印鑑（如適用）

Date 日期:_____