

**Notification of Change in Particulars of a Licensed Insurance Intermediary  
Insurance Agency/Insurance Broker Company**  
Pursuant to Section 64P of the Insurance Ordinance (Cap.41)

For Official Use					
LN		Update		Verify	

**Please complete all items in BLOCK LETTERS. All amendments must be signed by Authorized Person and original signed copy should be submitted.**

**I. Particulars of Licensed Insurance Intermediary**

<b>Insurance Intermediary Licence No.</b>		<b>Name in English</b>	
<b>† Type of licence</b>	<input type="checkbox"/> Insurance Agency <input type="checkbox"/> Insurance Broker Company		

**II. Type of Changes**

Please select the change(s) reported in this Notification and complete the relevant section(s) accordingly.

† Type of Changes	Section to be Completed	† Type of Changes	Section to be Completed
<input type="checkbox"/> English name	<b>Section III</b>	<input type="checkbox"/> Chinese name	<b>Section IV</b>
<input type="checkbox"/> Registered office/Principal place of business in Hong Kong	<b>Section V</b>	<input type="checkbox"/> Other business address	<b>Section VI</b>
<input type="checkbox"/> Telephone number/Fax number	<b>Section VII</b>	<input type="checkbox"/> Electronic mail address/ Website address	<b>Section VIII</b>

**III. Change in English Name**

(Please provide a copy of the relevant Certificate of Change of Name issued by Companies Registry.)

Former Name	New Name	Effective Date (DD/MM/YYYY)

**IV. Change in Chinese Name**

(Please provide a copy of the relevant Certificate of Change of Name issued by Companies Registry.)

Former Chinese Name	New Chinese Name	Effective Date (DD/MM/YYYY)

**V. Change in Address of Registered Office/Principal Place of Business in Hong Kong**

(Please provide a copy of the relevant Return of Change of Address filed with the Companies Registry and/or a copy of the Business Registration Certificate.)

Previous Address	New Address	Effective Date (DD/MM/YYYY)

† Please tick the appropriate box.

**VI. Change in Other Business Address(es)**

(Please provide a copy of relevant supporting document(s).)

Previous Address	New Address	Effective Date (DD/MM/YYYY)

**VII. Change in Telephone Number/Fax Number**

	Previous Number	New Number	Effective Date (DD/MM/YYYY)
<input type="checkbox"/> Tel No.			
<input type="checkbox"/> Fax No.			

**VIII. Change in Electronic Mail Address/Website Address**

(Please underline numeric characters.)

	Previous Address	New Address	Effective Date (DD/MM/YYYY)
<input type="checkbox"/> Email			
<input type="checkbox"/> Website			

**IX. Declaration by Licensed Insurance Intermediary**

I/We \_\_\_\_\_, hereby declare and confirm that:

*Name of Licensed Insurance Intermediary*

- All the information provided in this Notification and any documents in connection with this Notification are **COMPLETE, TRUE and CORRECT**.
- I/We understand that giving false or misleading information in support of this Notification is an offence under section 64ZZE of the Insurance Ordinance.
- I/We understand that the Insurance Authority ("IA") may take criminal and/or disciplinary action against a person who has made a false or misleading representation in or in support of this Notification.
- I/We understand that the IA may make such enquiries and seek such further information or documents as it thinks appropriate.
- I/We have read, understood and I/we agree to the attached Personal information Collection Statement.
- I/We consent to the IA using any of my/our personal data I/we have provided to the IA in (or in support of) this Notification, for the purposes described in the attached Personal Information Collection Statement.

\_\_\_\_\_

Name and Position of Authorized Person      Authorized Signature and Company Chop      Date

(This Notification Form should be signed by a Responsible Officer/Director/a person authorized by its Board of Directors/Sole Proprietor/Partner (where applicable).)

**WARNING: IT IS A CRIMINAL OFFENCE TO PROVIDE FALSE OR MISLEADING INFORMATION IN THIS NOTIFICATION.**

**Important Notes:**

- Under section 64P of the Insurance Ordinance, a licensed insurance intermediary must notify the IA in writing of any change of particulars **within 14 days** after the date on which the change takes place.

Originally signed Notification should be sent to:

Market Conduct Division (Licensing)  
Insurance Authority  
19/F, 41 Heung Yip Road  
Wong Chuk Hang  
Hong Kong

† Please tick the appropriate box.

Version: December 2020



## **Personal Information Collection Statement (“PICS”)**

This PICS is made by the Insurance Authority (“IA”) to comply with the notification requirements of the Personal Data (Privacy) Ordinance (Cap. 486) (the “PDPO”). You are advised to read it carefully as it sets out the policies and practices of the IA with regard to the personal data (as defined in the PDPO), the purposes for which the IA may collect and use the personal data and the persons to whom the personal data may be transferred.

### **Purpose of Collection**

The personal data provided in (and in support of) this notification by you or by any other persons may be used and held by the IA for one or more of the following purposes:

- (a) to administer and/or enforce the provisions of any relevant ordinances (including the Insurance Ordinance (Cap. 41) (the “Ordinance”)) and any regulations, rules, codes, guidelines and circulars made or promulgated pursuant to the powers vested in the IA as in force at the relevant time and to carry out its functions as a regulator of the insurance industry, including:
  - (i) to process any application(s)/notification(s) received by the IA under the Ordinance;
  - (ii) to assess the fitness and properness of any person in relation to licensing or approval (as the case may be) under the Ordinance;
  - (iii) to monitor the fitness and properness of any licensed insurance intermediaries or responsible officers to remain licensed or approved (as the case may be) under the Ordinance;
  - (iv) to consider any application(s) under the Ordinance where the licensed insurance intermediaries or responsible officers may otherwise have a connection;
  - (v) to display and publish personal data on the public registers maintained under the Ordinance (where applicable);
  - (vi) to investigate complaints and handle enquiries;
- (b) to co-operate with and assist any other regulatory body and/or law enforcement body of Hong Kong, or of any place outside Hong Kong, whenever appropriate, and to the extent permitted by the laws of Hong Kong;
- (c) for any statistical and research purposes; and/or
- (d) any other purposes as permitted by the laws of Hong Kong.

You are obliged to supply the requested personal data in response to any request from the IA in exercising its powers or carrying out its functions. Failure to provide the requested personal data may result in the IA being unable to exercise its powers or carrying out its functions (including processing your application(s)) and may affect the IA’s assessment of the fitness and properness under the Ordinance.

### **Transfer/Matching of Personal Data**

In performing the IA’s functions under the relevant laws and regulations, the personal data held by the IA may, for such purposes, be disclosed or transferred to any third parties, including financial regulators in Hong Kong (including but not limited to the Mandatory Provident Fund Schemes Authority, the Securities and Futures Commission and the Hong Kong Monetary Authority), educational institutions/examination bodies in or outside of Hong Kong (for the purpose of conducting qualifying examinations or verifying academic/professional qualifications), relevant appointing principals (authorized insurer, licensed insurance agency and/or licensed insurance broker company (as the case may be)), the Travel Agents Registry, the Travel Industry Council of Hong Kong, law enforcement agencies, law courts, tribunals and committees and/or other regulators or regulatory/government/judicial bodies as permitted and/or required under the laws of Hong Kong, pursuant to any regulatory/supervisory/investigatory assistance arrangements between the IA and such regulators/bodies (within or outside of Hong Kong) or persons engaged by the IA to assist it in the performance of its functions.

Personal data may also be used by the IA and/or disclosed or transferred by the IA to the parties listed above for the purposes of comparing, verifying and/or carrying out a matching procedure<sup>1</sup> of those data.

### **Public Registers**

The IA is required to maintain public registers with specified data related to licensed insurance intermediaries under the Ordinance or any related subsidiary legislation. Any member of the public can inspect the public registers free of charge for the purposes of ascertaining whether he/she is dealing with a licensed insurance intermediary or an approved responsible officer of a licensed insurance agency/insurance broker company in respect of any regulated activity, and the particulars of the licensing of a person as a licensed insurance intermediary and/or the approval of such person as a responsible officer.

### **Access to Data**

Under the PDPO, licensed insurance intermediaries and responsible officers have the right to request access to and/or for correction of the personal data held by the IA. Please complete a “Data Access Request Form” (which is available at the IA’s website) and send it by post to the Data Privacy Officer of the IA at 19/F, 41 Heung Yip Road, Wong Chuk Hang, Hong Kong for processing of the request. The IA has the right to charge a reasonable fee for processing any such request.

### **Enquiries**

Any enquiries regarding the personal data collected, used or transferred by the IA, or requests for access to and/or correction of, the personal data held by the IA should be made in writing to:

The Data Privacy Officer  
Insurance Authority  
19/F, 41 Heung Yip Road  
Wong Chuk Hang  
Hong Kong

A copy of the IA’s Privacy Policy is made available at the IA’s website.

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<sup>1</sup> “matching procedure” is defined in section 2 of the PDPO.