



CERTIFICATE OF BALANCE / STATEMENT / CHEQUE COPY / HISTORY REPORT REQUEST FORM 存款結餘證明書/結單/支票副本/收支紀錄申請表

Note 注意： 1. Please complete in **Block Letters** and tick where applicable. 請用正楷填寫，並在適當的地方加上劃號。
2. * For NIL Balance Investment Statement request, please specify in the option 'Others'.
* 如申請無結餘投資戶口結單，請在選項「其他」中註明。

Date 日期	day 日 / month 月 / year 年

Details of Account 戶口資料	
Account Name 戶口名稱	Account Number (Not applicable to Certificate of Balance) 戶口號碼 (不適用於存款結餘證明書)

Details of Request 申請資料	
Please arrange to supply me/us with a copy of the following document(s) and mail them to my/our correspondence address: 請發給本人(等)下列文件的副本，並郵寄往本人(等)的通訊地址：	
<input type="radio"/> * Statement/Report * 結單/紀錄	
<input type="radio"/> Account Statement 戶口結單 <input type="radio"/> Debit Interest Statement 信貸利息結單 <i>(For Integrated and Business Integrated Account only 只適用於綜合理財及商業綜合戶口)</i> <input type="radio"/> Savings Bank History Report 儲蓄存款收支紀錄 <input type="radio"/> Savings Consolidation Statement 儲蓄存款綜合結單 <input type="radio"/> Credit Card Statement 信用卡結單	Period 時期: From 由 _____ to 至 _____ Period 時期: From 由 _____ to 至 _____ <i>(Only the two most recent Debit Interest Cycles are available 只能提供最近兩個周期的信貸利息結單)</i> Period 時期: From 由 _____ to 至 _____ Statement Date 結單日期: From 由 _____ to 至 _____ Statement Date 結單日期: _____ (MM/YY 月/年)
<input type="radio"/> Paid Cheque 支票	
Cheque Number 支票號碼	Cheque Amount 支票金額
Transaction Date 交易日期	
<input type="radio"/> Certificate of Balance 存款結餘證明書 Please furnish me/us with a Certificate of Balance as at the close business on _____ for the following accounts: 請發給本人(等)下列戶口存款截至 _____ 結束營業時的存款結餘證明書： _____	
<input type="radio"/> Braille Account Statement Services (Applicable to HKD Current Account, Integrated Account - HSBC Premier/HSBC Advance only) 點字結單服務 (只適用於港元往來戶口，綜合理財戶口-卓越理財/運籌理財)	
<input type="radio"/> Add 新增 Account Number 戶口號碼: _____ Effective Date 生效日期: _____	<input type="radio"/> Delete 取消 Account Number 戶口號碼: _____ Effective Date 生效日期: _____
Note 注意： If customer requests a re-printing copy of Braille account statement, the Bank can only provide customer with the re-printing copy of statement in written format. 如客戶需要重印點字結單，本行只可提供以文字形式重印結單予客戶。	
<input type="radio"/> Others 其他：	

Handling Charge (as stated in the General Bank Tariffs) 手續費 (請參照一般銀行服務簡介) (Not applicable to Debit Interest Statement request 不適用於申請信貸利息結單)
<input type="radio"/> Please debit my/our #account number: 請支取自本人(等)的#戶口，戶口號碼為 _____ # Please specify Savings/Current for Integrated and Business Integrated Account. 如為綜合理財及商業綜合戶口，請註明儲蓄/往來。

Signature(s) and Contact Telephone Number 簽署及聯絡電話號碼
<input checked="" type="checkbox"/> Signature(s) 簽署 Contact Telephone Number 聯絡電話號碼： _____ Remarks 備註

For Bank Use Only 銀行專用		
For Item Relating to	Actions Required	Authorised Signature and Branch Chop
Current / SEE / INV / IA / BIA Account	For interim statement (ie for transactions performed between the last statement date and the day before the request), submit this form to GSC via NSC. For statement period on or before the last statement date, input via Central Retrieval System (CRS).	
Braille Statement	For customer with Braille statement need, complete CYS Braille Statement Account Maintenance Form and submit it to GSC on next working day if the Account is newly converted to HP or HSBC Advance.	
Savings Account / Paid Cheque Copy	Input via Central Retrieval System (CRS).	