

Request Form for Report Mis-Transferred Transaction 報告錯誤轉賬之申請表

Please submit the completed form enclosed with attachment (if any) via one of the following channels:
請透過以下任何一種途徑遞交已填妥之申請表並附上附件(如適用)

- Mail to: G.P.O. Box 21, Hong Kong (Attn: Central Team)
郵寄至: 香港郵政信箱21號中央處理組
- Email to: CT_RBO@sc.com
電郵至: CT_RBO@sc.com
- Submit to one of our branches
到任何一間分行申請

S2O (Not applicable to RTGS / CHATS Txn)



Please complete the form in BLOCK letters and put a tick in the appropriate box.
請以英文正楷填寫以下資料並於適當地方上加上剔號。

Date 日期	_____ DD 日 _____ MM 月 _____ YYYY 年
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Part A - Personal Information A 部份 - 個人資料

1. English Full Name/Company Name 英文全名 / 公司名				
2. Type of Identity Documents 身份證明文件種類	<input type="checkbox"/> HK Identity Card 香港身份證	Number: 號碼: _____	<input type="checkbox"/> Passport 護照/旅行證件	Number: 號碼: _____
	<input type="checkbox"/> Other 其他	(Please specify): (請注明): _____		Number: 號碼: _____
3. Existing Client 現有客戶	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No# 否 #		
4. Correspondence Address 通訊地址	(This field is only applicable for non-existing client) (此欄只適用於非現有客戶)			
5. Mobile Phone No. 手提電話號碼	(This field is only applicable for non-existing client) (此欄只適用於非現有客戶)			

For non existing SCB client, this request is only applicable to transactions made via SCB Cash and Cheque Deposit Machine or branches.
如閣下並非現有渣打客戶，只有透過渣打現金和支票存款機或分行所作之轉賬才適用於此申請。

Part B - Details of the Mis-transferred transaction B 部份 - 錯誤轉賬之詳情

6. Debit Account Number 扣賬戶口之號碼	<input type="checkbox"/> Banking Account Number 銀行戶口號碼: _____	<input type="checkbox"/> Credit Card Account Number 信用卡號碼: _____
7. Transaction Amount (Please indicate the currency) 轉賬金額 (請註明貨幣)		
8. Transaction Date and Time 轉賬日期及時間	_____ DD 日 _____ MM 月 _____ YYYY 年 _____ Hour 時 _____ Minute 分	
9. Means of the Transaction 轉賬方式	<input type="checkbox"/> Cash 現金 <input type="checkbox"/> Cheque 支票 <input type="checkbox"/> Local fund transfer (This request is not applicable to the transaction handled by any bank outside Hong Kong) 本地資金轉賬 (如處理收款或轉賬之銀行在香港以外之地方不適用於此申請) <input type="checkbox"/> SC PAY (Faster Payment System "FPS") SC PAY 「轉數快」 <input type="checkbox"/> Standing Instruction 常行指示 <input type="checkbox"/> Real Time Gross Settlement Systems (CHATS) 本地電子付款 (經由即時支付結算系統) <input type="checkbox"/> Direct Debit Instruction 直接轉賬授權指示 <input type="checkbox"/> Stored Value Facilities ("SVF") (e.g. Alipay, OlePAY, etc.) please specify: 儲值支付工具 (例如支付寶, 「好易畀」等) 請注明: _____ <input type="checkbox"/> Others, please specify: 其他, 請注明: _____	
10. Transaction Channel 轉賬渠道	<input type="checkbox"/> Branch 分行 <input type="checkbox"/> Automatic Teller Machine 提款機 Location 地點: _____ <input type="checkbox"/> Cash and Cheque Deposit Machine 支票及現金存款機 Location 地點: _____ <input type="checkbox"/> Online Banking 網上理財 <input type="checkbox"/> Mobile Banking 流動理財 <input type="checkbox"/> Phone Banking 電話理財	
11. Transaction Reference Number (if applicable, e.g. reference number of RTGC, FPS, etc.) 轉賬之參考編號 (如適用, 例如本地電子付款, 「轉數快」之參考編號等)		

Part C - Details of the transferee C 部份 - 收款人資料

12. Transferee's Bank and Account Number (if applicable) 收款人之銀行及戶口號碼 (如適用)	Bank 銀行: _____ <input type="checkbox"/> Banking Account Number 銀行戶口號碼: _____ <input type="checkbox"/> Credit Card Account Number 信用卡號碼: _____
13. Transferee's Mobile No. / Email Address / FPS Identifier (if applicable to transaction made through FPS) 收款人之電話號碼 / 電郵地址 / 快速支付系統識別碼 (如適用於「轉數快」之交易)	<input type="checkbox"/> Mobile No.: 電話號碼: _____ <input type="checkbox"/> Email Address: 電郵地址: _____ <input type="checkbox"/> FPS Identifier: 快速支付系統識別碼: _____

I agree and provide my consent to Standard Chartered Bank (HK) Limited to share the information stated in Part B to facilitate the transferee's bank/institution or any other 3rd parties may deem necessary to follow up the request with transferee to make the decision on returning the fund.
 我同意授權渣打銀行 (香港) 有限公司將此表格中 B 部份的資料給予收款人之銀行 / 機構或其他認為有需要跟進您的申請的第三方人士，以幫助收款人作出是否退還資金的決定。

*I submitted the evidence of the transaction, (please specify) _____, to facilitate the bank preform authentication.
 *我提交有關此轉賬交易的證明文件，(請注明) _____ 以茲核實此申請是否有效。

* Only applicable to non-Standard Chartered Bank (HK) Limited clients. For existing client, the bank will validate your transaction through internal system record.
 * 適用於非渣打銀行 (香港) 有限公司之客戶。如閣下為渣打銀行之現有客戶，本行會以內部系統記錄去核實您的轉賬交易。

Important Notes 注意事項

- A. The request is only applicable to transactions made within Hong Kong. This request is not applicable to transactions handled by any bank outside Hong Kong.
 此申請只適用於在香港進行的轉賬，如處理收款或轉賬之銀行在香港以外之地方不適用於此申請。
- B. For non existing SCB client, this request is only applicable to transactions made via SCB Cash and Cheque Deposit Machine or branches.
 如閣下並非現有渣打客戶，只有透過渣打現金和支票存款機或分行所作之轉賬才適用於此申請。
- C. If you do not agree and provide your consent to Standard Chartered Bank (HK) Limited ("the Bank") to share the information stated in Part B to facilitate the transferee's bank/institution or any other 3rd parties may deem necessary to follow up the request with transferee to make the decision on returning the fund. The Bank will not be able to proceed your request.
 如閣下不同意授權渣打銀行 (香港) 有限公司 (「本行」) 將此表格中 B 部份的資料給予收款人之銀行 / 機構或其他認為有需要跟進您的申請的第三方人士，以幫助收款人作出是否退還資金的決定，本行將無法處理你的申請。
- D. If the request submitted after 4:00pm from Monday to Friday or on Saturday, Sunday and Public Holidays, it will be received by the Bank in next working day.
 如果閣下於星期一至五下午四時後或於星期六、日及公眾假期遞交申請，本行將於下一個工作日收取您的申請。
- E. If you are existing client, the bank will contact you by the mobile phone no. stored in our bank and the correspondence address under the debit account/credit card which you provided on this form. If you are not existing client, please provide your mobile phone no. and the correspondence address on the form and ensure the information provided are accurate. Otherwise, the bank may not be able to reach you.
 如閣下是本行現有客戶，本行會根據閣下存於本行紀錄中的手提電話號碼及此申請表上填寫之扣賬戶口 / 信用卡的通訊地址聯絡閣下。如閣下並非本行現有客戶，請於此申請表上填妥您的手提電話號碼及通訊地址並確保提供的資料正確無誤，否則本行未必能夠聯絡到閣下。
- F. You will receive an acknowledgement SMS within 2 working days after the Bank accepting your request.
 本行會在接受您的申請後兩個工作天內發出短訊確認您的申請。
- G. The Bank will validate your transaction before processing your request, and the validation may take a few working days to complete.
 在處理要求退回資金的申請前，本行會先核實您的申請是否有效，核實的工作有可能需要數個工作天去完成。
- H. The result will be issued to you in a reasonable period (normally not exceeding 20 working days from the day that the Bank validate your request successfully). If the fund is successfully recovered, you may receive a deposit slip which indicated the details of the fund returned. If the fund cannot be recovered, a written confirmation which indicating the result and the actions taken by the transferee's bank/institution (if transferee's bank/institution provided such information) will be issued to you for your reference.
 本行將於合理時間內 (由成功確認您的申請為有效日起計，一般不超過二十個工作天) 發出書面通知，以通知您的申請結果。如果資金能成功退回，本行會附上存款通知書，其詳列有關退回資金的交易。如果您的申請不成功，發送予您的書面通知書將詳列由收款人銀行 / 機構 (如收款人銀行 / 機構提供了相關資料) 或本行所採取之跟進行動以作參考。
- I. The transferee's bank/institution may return funds in a method/channel which deemed to be appropriate. Service charges (if applicable) may be levied by their sole discretion.
 收款人銀行 / 機構會以他們認為合適的方法 / 渠道傳送或收取資金。因此，收款人銀行 / 機構可能會自行釐定所需徵收的服務費用 (如適用)。
- J. Once the fund is recovered, we may deduct all the applicable fees charged by the transferee's bank/institution before crediting to your debit account which you provided above.
 若資金能成功退回，本行將會先扣除由收款人銀行 / 機構所收取的服務費用 (如適用)，然後存入您上表所述的扣賬戶口。
- K. The Bank will use our best endeavour to follow up your request. However, it is not guaranteed the mis-transferred funds can be successfully recovered as it is subjected to the transferee's consent and authorization. The Bank is not responsible or liable in any disputes, failures or rejections of returning the mis-transferred funds.
 本行會盡力跟進您的資金退回申請。但退回錯誤轉賬之資金需得到收款人的同意和授權，因此本行無法保證該筆資金能夠成功收回。對於有關退回錯誤轉賬之資金申請的任何爭議、未能退回或被拒絕，本行概不負責。

Account Holder's Signature
 戶口持有人簽署

Date 日期 _____

Account Holder's Signature (Applicable to Joint account is both / all to sign)
 戶口持有人簽署 (適用於聯名戶口為「雙方 / 全體簽署」)

Date 日期 _____

For Bank Use Only	Signature Verified / TIN verified		Checked Hogan 7.1		<input type="checkbox"/> All of txn channels (except Payment related) – send to Banking Ops Email: CT_RB0@sc.com <input type="checkbox"/> Real Time Gross Settlement Systems (CHATS) – send to Payment (CMS) Email: R&I_Priv_Label.CSG@sc.com
	Sign No. ()		<input type="checkbox"/> Record found <input type="checkbox"/> No record found w/i txn history <input type="checkbox"/> Out of txn history		
	Branch code: _____	Staff ID: _____	Voice Log (For branch / CCC / CE)		
			Staff ID: _____	Call date & time: _____	