For Service Unit Use Only									
Application No.:	V				-				
Application Date:ddmmyyyy (the date when the duly completed application form together with copies of all the required documents reach the service unit)									
Means Test/Home Visit: completed onddyyyy (if applicable)									

Community Care Fund (CCF)

"One-off Living Subsidy for Low-income Households Not Living in Public Housing and

Not Receiving Co	omprenensiv	Application	- '	gramme (2020) (the 1 rogramme)
2. Applicants at Brief to the s	re required to subm service units assisti	lly the "Programme Brief" of the nit the completed Form together ing in the implementation of the	Please ens	sure that all parts in the application for completed. Inaccurate or incomplet on may lead to delay or application not t
		the Applicant	be process	sed further
Name in Chinese:	陳大文	N	ame in Englis	Sh: Chan Tai Man
Hong Kong Identity Card No. (see Note 2): (Please put a " " in the app	Z123456 propriet ook bel	Please choose the appropriate type of identity documents	-	<u>01</u> dd <u>05</u> mm <u>1983</u> yyyy
Type of Identity Docume Hong Kong mobile	Gender: ☑ Male ☐ Female			
phone no.:	9876 54	132 tele	phone no.:	2345 6789
Hong Kong residential	District	Sham Shui Po	No. and Name	e of Street / Lot No. <u>887 Un Chau Street</u>
address	No. and Nam	ne of Estate / Village		
(see Note 3)		llding <u>Un Chau Buildi</u>		
Please fill in loo residential add	cal rental /	Floor	6	Flat/Room A
(Please fill in the number of person(s) in the boxes below as appropriate) Household member(s) (see Note 4):_ (b) 1 eligible person(s) at the age of 18 or above (must fill in Part 5 of this Form) (b) 1 eligible person(s) under the age of 18 and/or those who are incapable of 18 and/or those who are i				
If no ineligible person is included, please fill in '0'	0	Programme Brief and m ineligible person(s) (see	ust fill in Part	nentally incapacitated (see item 8(b) of the 6 of this Form)
Total number of household member(s):		(b) and (c) above	•	eant and the persons mentioned in items (a),
Part 2: Disburseme			al number of	f household member(s) must include
The applicant may choose to appropriate box below): ☑ Bank Transfer (The a bank account solely u	pplicant must	provide below the printer items (a	ncipal applic), (b) and (c)	cant and the persons mentioned in
Name of Bank:	HSBC			
Bank Account No.:	0 0 4	5 4 3 2	1 6	7 8 9 0 1 3
Order Cheque in his/person within the spe		Please see iter		the designated service unit (see Note 1) in
Note 1 The list of service units		nplementation of the bank t	ransfer, the	ooses to receive the subsidy through applicant must provide his/her local sayings/ current bank account solely

responsible for any delayed submission or non-delivery of applic

under his/her name.

Note 2 Or the number of a Certificate of Exemption (if applicable).

Note 3 For homeless persons, they are required to provide the location where they usually sleep or the name of the emergency / temporary shelter / hostel / short-term hostel in which they are staying.

Including the applicant's and/or the applicant's eligible household member(s)' parents, who reside in non-subsidised places of private residential care homes for the elderly; and/or their household members who reside in non-subsidised places of private residential care homes for persons with disabilities; and/or household member(s) who reside in a university student hostel (see items 3 and 4 of the Programme Brief).

Including Comprehensive Social Security Assistance recipients, persons who have entered Hong Kong not for the purpose of settlement (e.g. two-way permit holders), and/or persons who have demonstrated to the satisfaction of the Immigration Department (ImmD) that they have adequate financial means to sustain their living in Hong Kong before they are issued with a visa / entry permit by the ImmD (see items 2(d) and 2(f) of the Programme Brief).

Part 3: Written Declaration (For the Applicant)	
		1
. I, the undersigned, declare that I am		r stated in Part 1 of this Form.
2. I hereby declare and confirm that:	income in the past 3 months	
- · · · · -	Part 5 and Part 5 form is (are) of one single hous	
household income in the past 3		at exceed the income limit applicable
	ander the Programme (see item 2(b) of the Programme Br	
	in Part 5 and Part 6 of this Form (except the parents are for the elderly/the household members residing in	
	reone with disabilities in university	mmodation at the
Hong Kong residential addre	ss indicated in Part 1 of this Form.	a ine Programme
_	g type (picase put a · in appre	Category
	nanent housing (see Note 6) of the following category:	nuhi ala)
☐ independent uni ☑ sub-divided un		
	industrial building; or	Please fill in the rent paid in the last month
	ommercial building; or	*
	cial housing operated by non-governmental organisations	
		0,500 , and the average
· · ·	to the relevant household size under the Pri to the Relevant household size under the Relevant household size	(see Note 8), which does not exceed e item 2(c) of the Programme Brief).
In addition, the accomm		ghter (see Note 9), husband or
wife (see item 2(g) of	ront noid in the past 3 months	nat with premium paid (see
Note 6) or a flat havin Premium Unpaid".	g successfully join	ised Sale Developments with
•	ed under the Home Affairs Department's Singleton Host	el Programme, or a hostel bedspace
	for rehabilitated offenders (see Note 10).	or regramme, or a noster seaspace
(iii) An emergency/temp	orary shelter / hostel / short-term hostel operated by NG	Os, or the Housing Department's Po
Tin Transit Centre i	n Tuen Mun / Lung Tin Transit Centre in Tai O (see Note	10).
	(see Note 11) of the following category:	
squatter structur roof-top structur		
(v) A vessel.	outer temporary nousing.	
· / □	nave been sleeping on the street for at least 7 consecutive	days as at the submission date of the
application.	are been sleeping on the street for at least 7 consecutive	days as at the submission date of the
(c) I do not receive Comprehensiv	e Social Security Assistance (see item 2(d) of the Program	nme Brief).
	g Kong (see item 2(e) of the Programme Brief).	
	ons who have entered Hong Kong not for the purpose on of the ImmD that they have adequate financial means	
	visa / entry permit by the ImmD (applicable to those	
residents, see item 2(f) of the I	* *	0 01
7.N.	1/	
Signature of the Applicant	Date:	3/7/2020
<i>F</i>	Applicant must sign <u>in person</u> and fill in the signa	ture date
N	come (cubicles / solid-partitioned cubicles) sub-divided units bedspare	/ 11 0

Note 6 Including all private residential flats, rooms (cubicles / solid-partitioned cubicles), sub-divided units, bedspaces / cocklofts, villas / bungalows / modern village houses, simple stone structures / traditional village houses, staff quarters, subsidised sale flats with premium paid (including flats under the Home Ownership Scheme and the Tenants Purchase Scheme), flats under the T-home "Letting Scheme for Subsidised Sale Developments with Premium Unpaid" and Tai Hang Sai Estate.

Note 7 Social housing refers to transitional social housing projects supported by the relevant bureau(x) and operated by NGOs.

Note 8 The applicant is required to submit copies of rent receipts showing one of the household members as the tenant of the accommodation concerned, the residential address and the monthly rent. If the accommodation is a flat under the T-home "Letting Scheme for Subsidised Sale Developments with Premium Unpaid", a copy of the "Certificate of Participation - Tenant" must be submitted.

Note 9 Including legally recognised adoptive parents/children and those illegitimate children.

Note 10 The applicant is required to submit documentary proof of staying in these emergency/temporary shelters, hostels or short-term hostels (such as rent receipts or the proof of occupancy issued by the shelter/hostel).

Note 11 Including Temporary Housing Area units, and private temporary housing such as roof-top structures, squatter structures, licensed structures (i.e. domestic structures licensed by the Lands Department), huts, places not intended for residential purpose (such as landings, staircases, corridors, etc.), contractor's matsheds and nissen huts.

Part 4: Declaration and Undertaking by the Applicant (For the Applicant)

- 3. I, the undersigned, declare that I am the holder of the Hong Kong Identity Card with the number stated in Part 1 of this Form.
- 4. I have read / have been read carefully the Personal Data Collection Statement (see Note 12) at Appendix 1 and the Programme Brief at Appendix 2 of this Form and I fully understand their content. I understand and agree that all terms and conditions of the Personal Data Collection Statement (including item 6 of the Personal Data Collection Statement, if applicable) and the Programme Brief apply to me and all the person(s) (if applicable) specified in Part 5 and Part 6 of this Form. I also understand and agree that my application is bound by all the terms and conditions stated in Part 3 and Part 4 of this Form.
- 5. I authorise and give my consent for the CCF Secretariat*, the Commission on Poverty (CoP), the CCF Task Force under the CoP and the relevant policy bureaux and departments of the Government of the Hong Kong Special Administrative Region (the Government) to use my data (including my personal data in their possession, information provided by me in this Form and other information I have submitted / may submit under the Programme) to process my application (including ascertaining the eligibility of myself and/or the person(s) specified in Part 5 and/or Part 6 of this Form under the Programme), to make arrangements for receiving the subsidy under the Programme, to conduct relevant vetting and/or investigation and to fulfil any other uses directly related to such purposes. I give my consent to disclose my personal data to any other parties if the disclosure is deemed necessary for such vetting and/or investigation. Relevant policy bureaux and departments include, but are not limited to, the Home Affairs Bureau (HAB), the ImmD, the Land Registry, the Social Welfare Department (SWD) and other relevant Government offices involved in the administration and operation of the Programme. I also authorise and give my consent to the policy bureaux/departments/organisations/companies holding my personal data to disclose such data to the CCF Secretariat for processing my application and making arrangement for releasing the subsidy under the Programme.
- 6. I give my consent for the CCF Secretariat* to check my data against my personal data held by the Land Registry and/or the SWD and/or other policy bureaux/departments of the Government for processing my application and making arrangements for receiving the subsidy under the Programme (see Note 13). I understand that the checking procedure is conducted to ascertain the eligibility of myself and/or the person(s) specified in Part 5 and/or Part 6 of this Form under the Programme. I and/or the person(s) specified in Part 5 and/or Part 6 of this Form will not be granted a subsidy under the Programme in case I am ineligible.
- 7. I confirm that I have obtained the consent of the person(s) specified in Part 5 and/or the parents / guardians / agents / legal guardians of the person(s) specified in Part 6 of this Form (if applicable) and other relevant person(s) that their personal data and/or the information provided in this Form have been or will be submitted (as necessary) to the CCF Secretariat[#] for processing my application (including ascertaining the eligibility of myself and/or the person(s) specified in Part 5 and/or Part 6 of this Form under the Programme) and any other directly related purposes, for vetting and/or investigation relating to my application and the arrangements for receiving the subsidy under the Programme, and for the disclosure of the data by the CCF Secretariat[#] to any other parties if the disclosure is deemed necessary for such vetting and/or investigation.
- 8. I understand and agree that the CCF Secretariat[#] has the right to conduct a comprehensive examination in the course of processing my application or after the disbursement of subsidy to verify that the information submitted by me is true, complete and accurate. I and the person(s) specified in Part 5 and Part 6 of this Form (if any) will fully co-operate with the CCF Secretariat[#], including providing the CCF Secretariat[#] with detailed income information and other information of myself and/or the person(s) specified in Part 5 and/or Part 6 of this Form for examination. The CCF Secretariat otherwise has the right to disqualify me and/or the person(s) specified in Part 5 and/or Part 6 of this Form from being eligible for the Programme, and/or request my repayment of the subsidy disbursed (including the subsidy I received for myself and/or for the eligible person(s) specified in Part 5 and/or Part 6 of this Form under the Programme).
- 9. I agree that the subsidy for myself and/or the eligible person(s) specified in Part 5 and/or Part 6 of this Form under the Programme be paid directly into my bank account as specified in Part 2 of this Form, or that the order cheque be arranged and issued to me by the CCF Secretariat*. I agree and undertake to notify the CCF Secretariat* forthwith of its overpayment or payment of subsidy by mistake to me and/or to the eligible person(s) specified in Part 5 and/or Part 6 of this Form under the Programme and refund the amount certified by the CCF Secretariat as overpaid or paid by mistake. If I have chosen to receive subsidy through bank transfer, I thus authorise the bank specified in Part 2 of this Form to debit from my bank account the amount certified by the CCF Secretariat as overpaid or paid by mistake to me and/or the eligible person(s) specified in Part 5 and/or Part 6 of this Form.
- 10. I declare and confirm that all information provided in this Form and other information submitted / to be submitted under the Programme are true and correct. I understand that if I knowingly or wilfully make a false statement or withhold information or otherwise mislead the CCF Secretariat* for the purpose of obtaining a subsidy under the Programme for myself and/or the person(s) specified in Part 5 and/or Part 6 of this Form, I am liable to prosecution. I understand that the deliberate provision of false information or omission of information in order to obtain a subsidy under the Programme for myself and/or the person(s) specified in Part 5 and/or Part 6 of this Form by deception is a criminal offence. Apart from failure to obtain a subsidy under the Programme, I and/or the person(s) specified in Part 5 and/or Part 6 of this Form are also liable to prosecution and, on conviction, to imprisonment for a maximum of 14 years under the Theft Ordinance (Cap. 210, Laws of Hong Kong).
- 11. I understand and agree that the decision of the CCF Secretariat on the application submitted by me and the person(s) specified in Part 5 and Part 6 of this Form (if applicable) shall be final.

Including its agents/contractors	(including but not limited	to the service units listed in Annex	1 of the Programme Brief)

Signature of the Applicant		Date:	3/7/2020_	
Applicant must sign <u>in person</u> and fill in the signature date				

Note 12 If you wish to receive information about the CCF or other assistance programmes in the future, please give your consent by signing your name at the bottom part of the Personal Data Collection Statement and return it together with the duly completed Form to the CCF Secretariat through service units.

Part 5: Information of and Decla applicable)	ration by the <u>First</u> Eligible Person at the Age of 18 or Above (if					
	n at the age of 18 or above is required to complete this part separately.)					
Personal Particulars Fill i	n the personal particulars of the first eligible person at the age of 18 or above					
Name in Chinese:	Name in English: Wong Siu Kuen					
Hong Kong Identity Card No. (see Note 2): R789456	(2) Date of Birth: 05 dd 09 mm 1978 yyyy					
Type of Identity Hong Kong	g <u>Permanent</u> Identity Card Gender: ☐ Male ☑ Female					
Document: ☑ Hong Kon	g Identity Card					
Residence ☑ Residing with the	Residing in a non-survised place of a private residential care home for					
(see Note Applicant	the elderly / a private for persons with disabilities					
4): Residing in a	Nome of the Henry					
university student	- the appropriate					
hostel	documents					
(Please put a "✓" in the appropriate box a	bove)					
Declaration and Undertaking	ove Hong Kong Identity Card with the number stated above.					
	Collection Statement at Appendix 1 and the Programme Brief at Appendix 2 of this Form and I fully understand					
=	nd conditions of the Personal Data Collection Statement (including item 6, if applicable) and the Programme					
application is bound by all the terms and conditions of	son(s) (if applicable) specified in Part 5 and Part 6 of this Form. I also understand and agree that my this Part.					
	made on a "household" basis, and I give my consent for the applicant to make an application on my behalf to					
the CCF Secretariat*. Should the application be suc relinquish my rights to make an application and receiv	cessful, I give my consent for the applicant to collect my subsidy on my behalf. I understand and agree to					
	the substity in my capacity as applicant. ate permanent housing / an industrial building / a commercial building given in Part 1 of this Form is rented					
by me and the applicant and other person(s) specified	l in Part 5 and the person(s) specified in Part 6 of this Form (except the parents residing in non-subsidised					
	ly/household members residing in non-subsidised places of private residential care homes for persons with is not a property owned by my father, mother, son, daughter (see Note 9), husband or wife.					
· · · · · · · · · · · · · · · · · · ·	absidised place of a private residential care home for the elderly/ a private residential care home for persons					
with disabilities/a university student hostel. The ap expenses.	plicant and/or other person(s) specified in Part 5 of this Form provide support for me to cover my living					
_	sive Social Security Assistance (see item 2(d) of the Programme Brief).					
7. I declare and confirm that I do not own a property in I	· · · · · · · · · · · · · · · · · · ·					
	sons who have entered Hong Kong not for the purpose of settlement, and/or those who have demonstrated to					
1	financial means to sustain their living in Hong Kong before they are issued with a visa / entry permit by the rmanent residents, see item 2(f) of the Programme Brief).					
	iat [#] , the Commission on Poverty (CoP), the CCF Task Force under the CoP and the relevant policy bureaux					
_	ong Special Administrative Region (the Government) to use my data (including my personal data in their					
1 1	n and other information I have submitted / may submit under the Programme) to process my application the applicant and/or other person(s) specified in Part 5 and/or the person(s) specified in Part 6 of this Form					
under the Programme), to make arrangements for rec	eiving the subsidy under the Programme, to conduct relevant vetting and/or investigation and to fulfil any					
other uses directly related to such purposes. I give my consent to disclose my personal data to any other parties if the disclosure is deemed necessary for such verting and/or investigation. Relevant policy burgary and departments include, but are not limited to the HAB, the ImpD the Land Registry, the SWD and other						
vetting and/or investigation. Relevant policy bureaux and departments include, but are not limited to, the HAB, the ImmD, the Land Registry, the SWD and other relevant Government offices involved in the administration and operation of the Programme. I also authorise and give my consent to the policy						
bureaux/departments/organisations/companies holding my personal data to disclose such data to the CCF Secretariat for processing my application and making						
arrangement for releasing the subsidy under the Progra 10. I give my consent for the CCF Secretariat* to che	unine. ck my data against my personal data held by the Land Registry and/or the SWD and/or other policy					
bureaux/departments of the Government for processi	ng the application submitted by the applicant and making arrangements for receiving the subsidy under the					
	re is conducted to ascertain the eligibility of myself and/or the applicant and/or other person(s) specified in Form under the Programme. I and/or the applicant and/or other person(s) specified in Part 5 and/or the					
	ranted a subsidy under the Programme in case I am ineligible.					
	in this Form and other information submitted / to be submitted by me and the applicant on my behalf under					
	that <u>if I knowingly or wilfully make a false statement or withhold information or otherwise mislead the CCF</u> under the Programme for myself and/or the applicant and/or other person(s) specified in Part 5 and/or the					
	e to prosecution. I understand that the deliberate provision of false information or omission of information					
•	or myself and/or the applicant and/or other person(s) specified in Part 5 and/or the person(s) specified in Part					
* *	Apart from rendering me and/or the applicant and/or other person(s) specified in Part 5 and/or the person(s) dy under the Programme, I am also liable to prosecution and, on conviction, to imprisonment for a maximum					
of 14 years under the Theft	hat the declaration is signed in parson by a hausshald					
	hat the declaration is signed in person by a household precise one above and the signature date is filled					
# Including its agents/contractors (including but not lim	<u> </u>					
Signature:	Date: 3/7/2020					

Part 5: Information of and Declaration by the <u>Second</u> Eligible Person at the Age of 18 or Above (applicable)
(Attention: Each eligible person at the age of 18 or above is required to complete this part separately.
there are more than two completion. If there is a second eligible person at the age of 18 or above, please fill in his/her personal particulars.
Hong Kong Identity Card No. (see Note 2): () Date of Birth : dd mm yyyy
Type of Identity
Document: Hong Kong Identity Card
Residence Residing with the Residing in a non-subsidised place of a private residential care home for
(see Note Applicant the elderly / a private residential care home for persons with disabilities
4): Residing in a Name of the Home:
university student hostel Monthly fee:
(Please put a "✓" in the appropriate box above)
Declaration and Undertaking
1. I, the undersigned, declare that I am the holder of the above Hong Kong Identity Card with the number stated above.
2. I have read / have been read carefully the Personal Data Collection Statement at Appendix 1 and the Programme Brief at Appendix 2 of this Form and I fully understate their content. I understand and agree that all terms and conditions of the Personal Data Collection Statement (including item 6, if applicable) and the Programme Brief apply to me and the applicant and all the person(s) (if applicable) specified in Part 5 and Part 6 of this Form. I also understand and agree that application is bound by all the terms and conditions of this Part.
3. I understand that application under the Programme is made on a "household" basis, and I give my consent for the applicant to make an application on my behalf the CCF Secretariat*. Should the application be successful, I give my consent for the applicant to collect my subsidy on my behalf. I understand and agree
relinquish my rights to make an application and receive the subsidy in my capacity as applicant. 4. I declare and confirm that the accommodation in private permanent housing / an industrial building / a commercial building given in Part 1 of this Form is rent
by me and the applicant and other person(s) specified in Part 5 and the person(s) specified in Part 6 of this Form (except the parents residing in non-subsidist places of private residential care homes for the elderly/household members residing in non-subsidised places of private residential care homes for persons we disabilities/university student hostels), and that the flat is not a property owned by my father, mother, son, daughter (see Note 9), husband or wife.
5. (If applicable) I confirm that I am residing in a non-subsidised place of a private residential care home for the elderly/a private residential care home for person with disabilities/a university student hostel. The applicant and/or other person(s) specified in Part 5 of this Form provide support for me to cover my livit expenses.
6. I declare and confirm that I do not receive Comprehensive Social Security Assistance (see item 2(d) of the Programme Brief).
7. I declare and confirm that I do not own a property in Hong Kong (see item 2(e) of the Programme Brief).
8. I declare and confirm that I do not belong to those persons who have entered Hong Kong not for the purpose of settlement, and/or those who have demonstrated the satisfaction of the ImmD that they have adequate financial means to sustain their living in Hong Kong before they are issued with a visa / entry permit by ImmD (applicable to those who are not Hong Kong permanent residents, see item 2(f) of the Programme Brief).
9. I authorise and give my consent for the CCF Secretariat [#] , the Commission on Poverty (CoP), the CCF Task Force under the CoP and the relevant policy burea and departments of the Government of the Hong Kong Special Administrative Region (the Government) to use my data (including my personal data in the possession, information provided by me in this Form and other information I have submitted / may submit under the Programme) to process my application (including ascertaining the eligibility of myself and/or the applicant and/or other person(s) specified in Part 5 and/or the person(s) specified in Part 6 of this Founder the Programme), to make arrangements for receiving the subsidy under the Programme, to conduct relevant vetting and/or investigation and to fulfil a other uses directly related to such purposes. I give my consent to disclose my personal data to any other parties if the disclosure is deemed necessary for su vetting and/or investigation. Relevant policy bureaux and departments include, but are not limited to, the HAB, the ImmD, the Land Registry, the SWD and other relevant Government offices involved in the administration and operation of the Programme. I also authorise and give my consent to the poli bureaux/departments/organisations/companies holding my personal data to disclose such data to the CCF Secretariat for processing my application and making arrangement for releasing the subsidy under the Programme.
10. I give my consent for the CCF Secretariat* to check my data against my personal data held by the Land Registry and/or the SWD and/or other poli bureaux/departments of the Government for processing the application submitted by the applicant and making arrangements for receiving the subsidy under the Programme. I understand that the checking procedure is conducted to ascertain the eligibility of myself and/or the applicant and/or other person(s) specified Part 5 and/or the person(s) specified in Part 6 of this Form under the Programme. I and/or the applicant and/or other person(s) specified in Part 5 and/or the person(s) specified in Part 5 a
person(s) specified in Part 6 of this Form will not be granted a subsidy under the Programme in case I am ineligible. 11. I declare and confirm that all information provided in this Form and other information submitted / to be submitted by me and the applicant on my behalf under the Programme are true and correct. I understand that if I knowingly or wilfully make a false statement or withhold information or otherwise mislead the Configuration of the purpose of obtaining a subsidy under the Programme for myself and/or the applicant and/or other person(s) specified in Part 5 and/or the person(s) specified in Part 6 of this Form, I am liable to prosecution. I understand that the deliberate provision of false information or or or mission of information order to obtain a subsidy under the Programme for myself and/or the applicant and/or other person(s) specified in Part 5 and/or the person(s) specified in Part 5 and/or the person specified in Part 6 of this Form ineligible for a subsidy under the Programme, I am also liable to prosecution and, on conviction, to imprisonment for a maximum of 14 years under the The Condition of Configuration of Hand Kanala.
12. I understand and agree the person(s) specified in Part member mentioned above and the signature date is filled Please ensure that the declaration is signed in person by a household member mentioned above and the signature date is filled
Including its agents/contr
Signature: Date:

Part 6: Information of the <u>First</u> Eligible Person who is Under the Age of 18 / Incapable of Managi His/Her Own Affairs / Mentally Incapacitated and Declaration by His/Her Parent / Guardia	_
Agent / Legal Guardian (if applicable) (Attention: Each eligible person who is under the age of 18 is required to have this part completed separately by his/parent/guardian; and each eligible person who required to have this part completed separately please contact the service unit for Supplementa who is under the age of 18 / incapable of managing his/her own affairs / mentally incapacitated	1 <u>is</u>
Personal Particulars of Eligible Person Name in Particulars of Eligible Person	
Name in Name in Date of Chinese: 陳小軒 English: Chan Siu Hin Birth: 01 dd 08 mm 2016 yy	W
	<i>y y</i>
Type of	
Document: Hong Kong Birth Certificate (applicable to the person under the age of 11 only)	
Please choose the appropriate type of identity documents No.: H984561 No do not hold any of the above identity documentity documentity documents For eligible person(s) who is under the age of 18, this part must be filled by his/ her parents/ guardian. For eligible person(s) who is incapable of managing his/her own affairs /	nst
Residence: Residing with the Residing in a non-subsid mentally incapacitated, this part must fo	r
(see Note Applicant the elderly / a private res be filled by his/ her agent/ legal es	
4) \ \ \ \ Residing in a \ Name of the Home:	
Choose the appropriate residence university student hostel Monthly fee: 'in the appropriate box above)	
Declaration and Undertaking by Parent / Guardian / Agent / Legal Guardian	
(see item 8(b) of the Programme Brief) 1. I, the undersigned, declare that my relationship to the holder of the above identity document with the number stated above (hereinafter referred to as "the above person") is: □ Father □ Mother □ Guardian □ Agent □ Legal Guardian (Please put a "✓" in the appropriate box.)	ove
 2. I confirm that I can, on behalf of the above person, give application as the following conditions have been met: (a) the above person is: (i) a minor; or (ii) incapable of managing his/her own affairs; or (iii) specified as mentally incapacitated under the Programme; (b) the above person is incapable of both understanding the purpose of this Part and deciding whether to give the prescrit consent; and (c) I have reasonable grounds for believing that the use of the data for this application is clearly in the interest of the above person. 	bed ove
3. I have read / have been read carefully the Personal Data Collection Statement at Appendix 1 and the Programme Brief Appendix 2 of this Form and I fully understand their content. I understand and agree that all terms and conditions of Personal Data Collection Statement (including item 6, if applicable) and the Programme Brief apply to the application submit by me on behalf of the above person and the applicant and the application of all the other person(s) (if applicable) specified Part 5 and Part 6 of this Form. I also understand and agree that my application on behalf of the above person is bound by all terms and conditions of this Part.	the tted d in
4. I understand that application under the Programme is made on a "household" basis, and I give my consent for the applicant make an application on behalf of the above person to the CCF Secretariat*. Should the application be successful, I give consent for the applicant to collect the subsidy on behalf of the above person. I understand and agree that the above person relinquishes his/her rights to make an application and receive the subsidy in his/her capacity as applicant.	my
5. I declare that the accommodation in private permanent housing / an industrial building / a commercial building given in Part 1 this Form is rented by the above person and the applicant and the person(s) specified in Part 5 and other person(s) specified Part 6 of this Form (except the parents residing in non-subsidised places of private residential care homes for elderly/household members residing in non-subsidised places of private residential care homes for persons we disabilities/university student hostels), and that the flat is not a property owned by the above person's father, mother, statistics (see Note 9), husband or wife.	d in the vith

- 6. (If applicable) I confirm that the above person is residing in a non-subsidised place of a private residential care home for the elderly/a private residential care home for persons with disabilities/a university student hostel. The above person is my father / mother / household member. I confirm that I provide support for the above person to cover his/her living expenses.
- 7. I declare and confirm that the above person does not receive Comprehensive Social Security Assistance (see item 2(d) of the Programme Brief).
- 8. I declare and confirm that the above person does not own a property in Hong Kong (see item 2(e) of the Programme Brief).
- 9. I declare and confirm that the above person does not belong to those persons who have entered Hong Kong not for the purpose of settlement, and/or those who have demonstrated to the satisfaction of the ImmD that they have adequate financial means to sustain their living in Hong Kong before they are issued with a visa / entry permit by the ImmD (applicable to those who are not Hong Kong permanent residents, see item 2(f) of the Programme Brief).
- 10. I authorise and give my consent for the CCF Secretariat*, the Commission on Poverty (CoP), the CCF Task Force under the CoP and the relevant policy bureaux and departments of the Government of the Hong Kong Special Administrative Region (the Government) to use my data (including my personal data in their possession, information provided by me in this Form and other information I have submitted / may submit under the Programme) to process my application (including ascertaining the eligibility of the above person and/or the applicant and/or the person(s) specified in Part 5 and/or other person(s) specified in Part 6 of this Form under the Programme), to make arrangements for receiving the subsidy under the Programme, to conduct relevant vetting and/or investigation and to fulfil any other uses directly related to such purposes. I give my consent to disclose my personal data to any other parties if the disclosure is deemed necessary for such vetting and/or investigation. Relevant policy bureaux and departments include, but are not limited to, the HAB, the ImmD, the Land Registry, the SWD and other relevant Government offices involved in the administration and operation of the Programme. I also authorise and give my consent to the policy bureaux/departments/organisations/companies holding my personal data to disclose such data to the CCF Secretariat for processing my application and making arrangement for releasing the subsidy under the Programme.
- 11. I give my consent for the CCF Secretariat* to check the data of myself and of the above person against the personal data of myself and of the above person held by the Land Registry and/or the SWD and/or other policy bureaux/departments of the Government for processing the application submitted by the applicant and making arrangements for receiving the subsidy under the Programme. I understand that the checking procedure is conducted to ascertain the eligibility of the above person and/or the applicant and/or the person(s) specified in Part 5 and/or other person(s) specified in Part 6 of this Form under the Programme. The above person and/or the applicant and/or the person(s) specified in Part 5 and/or other person(s) specified in Part 6 of this Form will not be granted a subsidy under the Programme in case the above person is ineligible.
- 12. By using the subsidy granted by the CCF Secretariat to the applicant who collects the subsidy on behalf of the above person under this Programme as a cost, I undertake to indemnify the CCF Secretariat for the losses suffered by the CCF Secretariat caused by possible claims put forward by other person(s) in respect of the collection of subsidy by the applicant on behalf of the above person under the Programme.
- 13. I declare and confirm that all information provided in this Form and other information submitted / to be submitted by me and/or the applicant on behalf of the above person under the Programme are true and correct. I understand that if I knowingly or wilfully make a false statement or withhold information or otherwise mislead the CCF Secretariat# for the purpose of obtaining a subsidy under the Programme for the above person and/or the applicant and/or the person(s) specified in Part 5 and/or other person(s) specified in Part 6 of this Form, I am liable to prosecution. I understand that the deliberate provision of false information or omission of information in order to obtain a subsidy under the Programme for the above person and/or the applicant and/or the person(s) specified in Part 5 and/or other person(s) specified in Part 6 of this Form by deception is a criminal offence. Apart from rendering the above person and/or the applicant and/or the person(s) specified in Part 5 and/or other person(s) specified in Part 6 of this Form ineligible for a subsidy under the Programme, I am also liable to prosecution and, on conviction, to imprisonment for the applicant and the Programme, I am also liable to prosecution and, on conviction, to imprisonment for the above person and the Programme, I am also liable to prosecution and, on conviction, to imprisonment for the above person and the Programme, I am also liable to prosecution and, on conviction, to imprisonment for the above person and the Programme, I am also liable to prosecution and, on conviction, to imprisonment for the above person and the Programme, I am also liable to prosecution and the Programme, I am also liable to prosecution and the Programme for the person and the Programme, I am also liable to prosecution and the Programme for the person and the Program

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8) Date:

3/7/2020

/ legal guardian:

Personal Data Collection Statement

Purpose of Collection

- 1. Your data provided in this application form (this Form) and obtained under the "One-off Living Subsidy for Low-income Households Not Living in Public Housing and Not Receiving Comprehensive Social Security Assistance" programme (the Programme) will be used by the Community Care Fund (CCF) Secretariat and its agents/contractors* for the following purposes and directly related purposes:
 - (a) to process and vet the application submitted by the applicant and to make arrangements for receiving a subsidy (if applicable) under the Programme and, if required, to communicate with you for matters relating to the Programme;
 - (b) to administer the Programme and to conduct vettings and investigations relating to the application, including checking your data provided in this application form against your personal data held by the Government (including but not limited to the Immigration Department, the Land Registry, and the Social Welfare Department) and the operating agency of the residence you reported in the application to ascertain the eligibility of the applicant and/or the person(s) specified in Part 5 and/or Part 6 of this Form under the Programme;
 - (c) to serve the purposes of doing statistics and researches, including but not limited to understanding the effectiveness of the assistance provided to beneficiaries under the Programme and the living conditions of the beneficiaries, on condition that the resulting statistics and research findings will not be shown in a way that data subjects or any of the persons involved can be identified; and
 - (d) to fulfil the purposes required, authorised or permitted by law.
- 2. The provision of personal data is voluntary. However, if you do not provide sufficient and correct data, the CCF Secretariat and its agents/contractors[#] may not be able to process the application submitted by the applicant and the application may be rejected.

Categories of Parties to Whom the Data May be Transferred

- 3. Your data will be disclosed to the following parties or policy bureaux/departments of the Government:
 - (a) the Commission on Poverty (CoP) and the CCF Task Force under the CoP and/or their agents/contractors[#] and/or relevant policy bureaux/departments of the Government for the purposes stated in paragraph 1 above; and
 - (b) the Census and Statistics Department and its agents/contractors for statistics and research purposes. The resulting statistics and research findings will not be shown in a way that data subjects or any of the persons involved can be identified.

Access to Personal Data

4. Except for the exemption provided under the Personal Data (Privacy) Ordinance (Cap. 486, Laws of Hong Kong), you have the right to request access and correction to your personal data held by the CCF Secretariat that has not yet been erased. Your right of access includes the right to obtain a copy of your data upon payment of a fee.

Requests for Access and Correction to Personal Data

5. Your requests for access to your personal data or your enquiries about our personal data privacy policy, and your requests for correction to the data obtained from such an access should be addressed to:

Post : Executive Officer (Community Care Fund) 2

Address : Community Care Fund Secretariat

16/F, Pioneer Centre, 750 Nathan Road, Mongkok, Kowloon

Tel. No. : 2835 2172

Use of Data in Direct Marketing (T

6. The CCF Secretariat and its at residential address and Hong Kong information about the CCF or other

If the applicant agrees to receive any information about the CCF or other assistance programmes, he/ she must sign in person and fill in the signature date.

ame, Hong Kong oviding you with ontractors# cannot

use your data for the above purposes unless your conthe above information by signing this statement.

n obtained. Please indicate your consent to receiving

the above information by signing this sta Signature of the Applicant:

Date: 3/7/2020

[#] Including but not limited to the service units listed in Annex 1 of the Programme Brief