

Statement of Request

(Persons aged 65 or above residing in Chinese mainland)

Applicable to **funds of Non-Mandatory Central Provident Fund and Wealth Partaking Scheme**

For FSS use only

RP-02

To: Social Security Fund

I, (name) _____, holder of
Macao SAR Resident Identity Card number _____ (submission of photocopy of identity card required),
hereby make a request for the distribution of funds for the year 20____. I resided in Macao for less than 183 days in the preceding calendar year because I was a “person aged 65 or above residing in Chinese mainland”. I hereby declare as follows:

*Each Statement of Request corresponds to one year of fund distribution only. Please fill out another Statement of Request in the event of multiple years.

Period of residence	Residing in Chinese mainland in the calendar year preceding the year of fund distribution: from ____ (day) ____ (month) to ____ (day) ____ (month) ____ (year)
Residential address in Chinese mainland	
Certification method	<p>*Please tick “✓” the corresponding box <input type="checkbox"/> to indicate the certification method. (Choose one of the options)</p> <p><input type="checkbox"/> Certification documents I hereby submit a photocopy of the proof of residence issued by the civil affairs departments, neighbourhood committees, village committees or residential care facilities in Chinese mainland. (If the applicant submits the document at the counter, a photocopy can be submitted and the original is required to be produced for verification; if the request is made by post, the original must be submitted.) The organisation’s letterhead paper must be used for the proof of residence. The content includes the issuing organisation’s full name, address and phone number, the name and identity card number as appeared on the Macao SAR Resident Identity Card of the applicant, the period of residence and address in Chinese mainland, the seal of the organisation and the date of issue. (The samples of certification documents can be downloaded from the website of the Social Security Fund www.fss.gov.mo or the website of the Wealth Partaking Scheme www.planocp.gov.mo/en/, or they can be collected at the service locations).</p> <p><input type="checkbox"/> Providing two witnesses for certification I hereby provide two Macao SAR residents aged 18 or above as witnesses (submission of photocopies of identity cards of the witnesses required) to testify that I resided in Chinese mainland in the above-mentioned period.</p> <p>As witnesses, _____ and _____ hereby testify that the information declared by the applicant is true. We clearly understand that we can be criminally prosecuted if we make a false declaration.</p> <p>Witness _____ Witness _____</p> <p>_____ Signature (as appeared on Macao SAR Resident Identity Card) _____(Day) / ____ (Month) / ____ (Year)</p> <p>_____ Signature (as appeared on Macao SAR Resident Identity Card) _____(Day) / ____ (Month) / ____ (Year)</p>

I hereby declare that all the information provided herein is true and I understand that the Social Security Fund may transfer the relevant information to other departments/organisations for verification purposes.

I fully understand that if I make a false declaration or provide inaccurate or untrue information, I can be criminally prosecuted and the funds distributed must be returned.

•If the applicant is an incapacitated person, the representative is required to fill out the Declaration (C/2) and submit the relevant certification documents, in addition to this Statement of Request.

•**Note: In addition to submission of the documents mentioned above, the applicant is required to provide other relevant certification documents as required by the Social Security Fund.**

Applicant

Signature (as appeared on Macao SAR Resident Identity Card)
(If the applicant cannot/is unable to sign, please leave the right thumbprint.)

_____(Day) / ____ (Month) / ____ (Year)