Hong Kong Monetary Authority

Self Assessment of
Compliance with Code of Banking Practice

Name of Reporting Institution:

AI Code: ________ *The AI Code can be referenced under the user profile in the Common Submission Platform.*

For period: **10 December 2024 to 31 December 2025**

This report is prepared by:

Signature : ____________________

Name : ____________________

Department : ____________________

Post Title : ____________________

Telephone : ____________________

Fax : ____________________

Email : ____________________

(Please provide an ICLNet email address, if any)

Approved by :

____

Signature of Chief Executive

____

Name of Chief Executive

Name and contact details of the person whom the Hong Kong Monetary Authority may contact in relation to this self-assessment

Name and post title: ____________________

Contact number: ____________________

Email address: ____________________

(Please provide an ICLNet email address, if any)

***Signature and submission arrangement**

Please sign this submission using electronic signature. The following forms of electronic signatures are acceptable: (i) a digital signature supported by a valid e-Cert issued by the Hongkong Post Certification Authority; (ii) an image of the signatory's signature (e.g. submitting a scanned copy of a manually signed document); and (iii) the scanned copy of an email (e.g. your institution's relevant internal approval email) evidencing the other signatory's authorisation has been given to this submission. Each signatory hereby acknowledges that their electronic signature constitutes an effective signature having the same legal effect as a manual signature.

Your Institution should put in place adequate control procedures and measures to ensure that the signatory has given proper authorisation to this submission. Please confirm by ticking the box under 'Signature and Submission Arrangement' in the Survey Tool.

COMPLETION INSTRUCTIONS

Please read these notes carefully before completing the self-assessment.

Reporting period

1. The reporting period is from 10 December 2024 to 31 December 2025. The self-assessment report should be submitted by 31 March 2026.

General

2. This self-assessment should be carried out by the internal audit department, the compliance department or other equivalent unit of the institution. It should be endorsed by the head of the relevant department and should be approved and signed by the Chief Executive of the institution.

3. According to section 1.2 of the Code of Banking Practice (the Code), institutions' subsidiaries and affiliated companies controlled by them which are not institutions and are not licensed, regulated or supervised by any financial regulators in Hong Kong should also observe the Code where applicable when providing banking services in Hong Kong. If your institution has such subsidiaries and affiliated companies (subsidiaries and affiliated companies), they should be covered by this self-assessment and reported as explained in the following, and a list of their names and types of banking services should be provided in the worksheet titled "List of Subsidiaries".

Declaration

4. If the Code does not apply to your institution <u>and</u> your institution does not have any such subsidiaries and affiliated companies as defined in item 3 above, complete the worksheet titled "Declaration" and return it to the HKMA. In this case, it is not necessary for your institution to complete the rest of the report.

Part I and Part I(A)
Specific questions

5. In assessing compliance with individual provisions of the Code, the institution, and the subsidiaries and affiliated companies should take into account:
   - any new provisions, revisions, recommendations or interpretative notes issued by the Code of Banking Practice Committee[1], and
   - all business segments and channels of and products and services provided by the reporting entity.

6. Responses of the institution should be reported in the worksheet titled "Part I".

   If for any question in relation to each section, a negative response is appropriate for one or more requirements under that section, an overall negative response should be entered in the relevant box. If a section does not apply to the institution, e.g. the institution is not engaged in the business concerned, an "NA" should be entered in the relevant boxes. Details should be provided separately in the worksheet titled "Part I - Details" as specified in item 8 below.

7. Responses of the subsidiaries and affiliated companies should be reported in the worksheet titled "Part I (A)".

   If for any question in relation to each section, a negative response is appropriate for one or more requirements under that section for one or more subsidiaries and affiliated companies, an overall negative response should be entered in the relevant box. If a section applies to none of the subsidiaries and affiliated companies, e.g. none of the subsidiaries and affiliated companies is engaged in the business concerned, an "NA" should be entered in the relevant boxes. Details should be provided separately in the worksheet titled "Part I (A) - Details" as specified in item 9 below.

Details

8. If a negative response is entered in the worksheet titled “Part I”, please fill in the corresponding boxes in the worksheet titled “Part I - Details”.

   For any negative response to Question (i), you <u>must</u> include information on:
   - the subsection(s) for which there are no policies and procedures
   - an action plan for setting up policies and procedures or other similar measures, and
   - target completion date.

   For any negative response to Question (ii), you <u>must</u> include information on:
   - the subsection(s) with which the institution does not comply
   - a brief description of the non-compliance (but where an instance of non-compliance is identified which is a recurrence of similar instances identified in previous exercises, a full account should be provided)
   - whether rectification of the non-compliance has been completed (Yes or No), and
   - the date the incident reporting form for securities, insurance and MPF businesses, and banking conduct-related issues on the non-compliance was filed to the HKMA[2].

   If more than one instance is reported under the relevant section, you should provide the above information corresponding to each instance. DO NOT mix answers about different instances in one line; write them in separate paragraphs and align them with answers in neighbouring cells about the same instance.

9. For the subsidiaries and affiliated companies, details should be provided in the worksheet titled “Part I (A) - Details” in the same manner as explained in item 8 above with the additional requirement that the names of subsidiaries and affiliated companies concerned be specified for EACH instance giving rise to the negative response.

Part II
Supplementary questions

10. Please answer all questions applicable to your institution and the subsidiaries and affiliated companies. Each answer should be supplemented by a description or explanation as required in the question.

Use of this template

11. Please do not attempt to modify this template. If you encounter any technical issues with the Survey Tool, please contact the Survey Tool support team by email at surveytool_support@hkma.gov.hk. For enquiries regarding the self-assessment, please contact Ms Natalie Lai on 2597 0869 or Ms Cora Ching on 2878 8211.

12. When completing “Part I - Details”, “Part I (A) - Details” and “Part II - Supplementary questions”, you may press the “ALT” and “ENTER” keys simultaneously to start a new paragraph within the same box.

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1 The Code of Banking Practice Committee has been established by the two industry associations to provide guidance or interpretations of the Code, and to undertake review of the Code from time to time. The Committee’s interpretations and recommendations are issued in the form of circulars by the two industry associations.

2 Please refer to the emails from the HKMA's Banking Conduct Department dated 27 May 2016, 25 September 2019, and 3 August 2022 in relation to incident reporting form for securities, insurance and MPF businesses, and banking conduct-related issues for the reporting procedures.

SUBMISSION INSTRUCTIONS

1. Log in to the Common Submission Platform to access the Survey Tool.

2. Download the excel reporting template from the Survey Tool and complete the report.

3. Submit (i) a copy of this report (in **EXCEL** format) and (ii) scanned signed copies of "Covering Page" and "Declaration" (if applicable) (in **PDF** format) to the HKMA by attaching the files in the Survey Tool.

DECLARATION

We hereby declare that the Code of Banking Practice applies to neither our institution nor any of the subsidiaries and affiliated companies controlled by it for the period from 10 December 2024 to 31 December 2025. The reasons are:

Signed by

Signature of Chief Executive

Name of Chief Executive

***Signature and submission arrangement**

Please sign this submission using electronic signature. The following forms of electronic signatures are acceptable: (i) a digital signature supported by a valid e-Cert issued by the Hongkong Post Certification Authority; (ii) an image of the signatory's signature (e.g. submitting a scanned copy of a manually signed document); and (iii) the scanned copy of an email (e.g. your institution's relevant internal approval email) evidencing the other signatory's authorisation has been given to this submission. Each signatory hereby acknowledges that their electronic signature constitutes an effective signature having the same legal effect as a manual signature.

Your Institution should put in place adequate control procedures and measures to ensure that the signatory has given proper authorisation to this submission. Please confirm by ticking the box under 'Signature and Submission Arrangement' in the Survey Tool.

LIST OF SUBSIDIARIES AND AFFILIATED COMPANIES

(a) Section 1.2 specifies that institutions' subsidiaries and affiliated companies controlled by them which are not institutions and are not licensed, regulated or supervised by any financial regulators in Hong Kong should observe the Code where applicable when providing banking services in Hong Kong. Does your institution have any such subsidiaries and affiliated companies?

If yes, please provide a list of all these subsidiaries and affiliated companies in (b).

(b) Total number of the subsidiaries and affiliated companies:

No.	Name of subsidiary or affiliated company	Type(s) of banking service(s) provided
1		
2		
3		
4		
5		
6		

PART I - SPECIFIC QUESTIONS (FOR INSTITUTION)

Section reference in current version		(i) Does your institution have policies and procedures in place for compliance with the following sections of the Code:		(ii) Does your institution comply with the following sections of the Code:	
	Chapter 1 – Relationship between Institutions and Customers				
5.	Terms and Conditions	(i)		(ii)	
6.	Fees and Charges	(i)		(ii)	
7.	Debt Recovery Expenses	(i)		(ii)	
8.	Collection, Use, Holding and Erasure of Customer Information	(i)		(ii)	
9.	Personal Referees	(i)		(ii)	
10.	Equal Opportunity	(i)		(ii)	
11.	Bank Marketing	(i)		(ii)	
12.	Annualised Percentage Rates	(i)		(ii)	
13.	Handling Customer Complaints	(i)		(ii)	
14.	Modifications to Bank Branch Services	(i)		(ii)	
15.	Management of Banking Activities	(i)		(ii)	
16.	Notification of Cyberthreats, Fraudulent Activities and other Customer Security Risks	(i)		(ii)	
17.	Review of Application and Transaction Information	(i)		(ii)	
18.	Provision of Information in Non-paper Based Format	(i)		(ii)	
	Chapter 2 – Accounts and Loans				
19.	Opening of Accounts	(i)		(ii)	
20.	Closing of Accounts	(i)		(ii)	
21.	Operation of Accounts	(i)		(ii)	
22.	Rights of Set-off	(i)		(ii)	
23.	Deposit Accounts	(i)		(ii)	
24.	Loans and Overdrafts	(i)		(ii)	
25.	Residential Mortgage Lending	(i)		(ii)	
26.	Other Secured Lending	(i)		(ii)	
27.	Guarantees and Third Party Securities	(i)		(ii)	
	Chapter 3 – Card Services				
29.	Issue of Cards	(i)		(ii)	
30.	Terms and Conditions	(i)		(ii)	
31.	Fees and Charges	(i)		(ii)	
32.	Interest Rate	(i)		(ii)	
33.	Repayment	(i)		(ii)	
34.	Rights of Set-off	(i)		(ii)	
35.	Security of Cards / Authentication Factors	(i)		(ii)	
36.	Transaction Records	(i)		(ii)	
37.	Unauthorized Transactions	(i)		(ii)	
38.	Lost Cards/PINs	(i)		(ii)	
39.	Liability for Loss	(i)		(ii)	
40.	Treatment of Credit Balances	(i)		(ii)	
41.	Direct Mailing	(i)		(ii)	
	Chapter 4 – Payment Services				
42.	Cheques	(i)		(ii)	
43.	Cross-boundary Payments and Local Fund Transfers	(i)		(ii)	
44.	Other Payment Services	(i)		(ii)	
	Chapter 5 – Recovery of Loans and Advances				
46.	Debt Collection Activities	(i)		(ii)	
47.	Management of Debt Collection Agencies	(i)		(ii)	
	Chapter 6 – Electronic Banking Services				
48.	Disclosure for e-banking Services	(i)		(ii)	
49.	Security in relation to e-banking	(i)		(ii)	
50.	Reporting of Actual or Suspected Security Incidents	(i)		(ii)	
51.	Liability for Loss	(i)		(ii)	

PART I - DETAILS (FOR INSTITUTION)

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.					If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.			
			Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
	Chapter 1 – Relationship between Institutions and Customers										
5.	Terms and Conditions	(i)					(ii)				
6.	Fees and Charges	(i)					(ii)				
7.	Debt Recovery Expenses	(i)					(ii)				
8.	Collection, Use, Holding and Erasure of Customer Information	(i)					(ii)				
9.	Personal Referees	(i)					(ii)				
10.	Equal Opportunity	(i)					(ii)				
11.	Bank Marketing	(i)					(ii)				
12.	Annualised Percentage Rates	(i)					(ii)				
13.	Handling Customer Complaints	(i)					(ii)				

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.					If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.			
			Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
14.	Modifications to Bank Branch Services	(i)					(ii)				
15.	Management of Banking Activities	(i)					(ii)				
16.	Notification of Cyberthreats, Fraudulent Activities and other Customer Security Risks	(i)					(ii)				
17.	Review of Application and Transaction Information	(i)					(ii)				
18.	Provision of Information in Non-paper Based Format	(i)					(ii)				
	Chapter 2 – Accounts and Loans										
19.	Opening of Accounts	(i)					(ii)				
20.	Closing of Accounts	(i)					(ii)				
21.	Operation of Accounts	(i)					(ii)				
22.	Rights of Set-off	(i)					(ii)				

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.					If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.			
			Sub-section(s)	**Action plan**	**Target completion date (DD/MM/YYYY)**			**Sub-section(s)**	**Description of non-compliance**	**Rectification completed (Y/N)**	**Filing date of incident reporting form (DD/MM/YYYY)**
23.	Deposit Accounts	(i)					(ii)				
24.	Loans and Overdrafts	(i)					(ii)				
25.	Residential Mortgage Lending	(i)					(ii)				
26.	Other Secured Lending	(i)					(ii)				
27.	Guarantees and Third Party Securities	(i)					(ii)				
	Chapter 3 – Card Services										
29.	Issue of Cards	(i)					(ii)				
30.	Terms and Conditions	(i)					(ii)				
31.	Fees and Charges	(i)					(ii)				
32.	Interest Rate	(i)					(ii)				

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.					If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.			
			Sub-section(s)	**Action plan**	**Target completion date (DD/MM/YYYY)**			**Sub-section(s)**	**Description of non-compliance**	**Rectification completed (Y/N)**	**Filing date of incident reporting form (DD/MM/YYYY)**
33.	Repayment	(i)					(ii)				
34.	Rights of Set-off	(i)					(ii)				
35.	Security of Cards / Authentication Factors	(i)					(ii)				
36.	Transaction Records	(i)					(ii)				
37.	Unauthorized Transactions	(i)					(ii)				
38.	Lost Cards/PINs	(i)					(ii)				
39.	Liability for Loss	(i)					(ii)				
40.	Treatment of Credit Balances	(i)					(ii)				
41.	Direct Mailing	(i)					(ii)				
	Chapter 4 – Payment Services										

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.					If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.			
			Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
42.	Cheques	(i)					(ii)				
43.	Cross-boundary Payments and Local Fund Transfers	(i)					(ii)				
44.	Other Payment Services	(i)					(ii)				
	Chapter 5 – Recovery of Loans and Advances										
46.	Debt Collection Activities	(i)					(ii)				
47.	Management of Debt Collection Agencies	(i)					(ii)				
	Chapter 6 – Electronic Banking Services										
48.	Disclosure for e-banking Services	(i)					(ii)				
49.	Security in relation to e-banking	(i)					(ii)				
50.	Reporting of Actual or Suspected Security Incidents	(i)					(ii)				
51.	Liability for Loss	(i)					(ii)				

PART I (A) - SPECIFIC QUESTIONS (FOR SUBSIDIARIES AND AFFILIATED COMPANIES)

Section reference in current version		(i) Does your institution have policies and procedures in place for compliance with the following sections of the Code:		(ii) Does your institution comply with the following sections of the Code:	
	Chapter 1 – Relationship between Institutions and Customers				
5.	Terms and Conditions	(i)		(ii)	
6.	Fees and Charges	(i)		(ii)	
7.	Debt Recovery Expenses	(i)		(ii)	
8.	Collection, Use, Holding and Erasure of Customer Information	(i)		(ii)	
9.	Personal Referees	(i)		(ii)	
10.	Equal Opportunity	(i)		(ii)	
11.	Bank Marketing	(i)		(ii)	
12.	Annualised Percentage Rates	(i)		(ii)	
13.	Handling Customer Complaints	(i)		(ii)	
14.	Modifications to Bank Branch Services	(i)		(ii)	
15.	Management of Banking Activities	(i)		(ii)	
16.	Notification of Cyberthreats, Fraudulent Activities and other Customer Security Risks	(i)		(ii)	
17.	Review of Application and Transaction Information	(i)		(ii)	
18.	Provision of Information in Non-paper Based Format	(i)		(ii)	
	Chapter 2 – Accounts and Loans				
19.	Opening of Accounts	(i)		(ii)	
20.	Closing of Accounts	(i)		(ii)	
21.	Operation of Accounts	(i)		(ii)	
22.	Rights of Set-off	(i)		(ii)	
23.	Deposit Accounts	(i)		(ii)	
24.	Loans and Overdrafts	(i)		(ii)	
25.	Residential Mortgage Lending	(i)		(ii)	
26.	Other Secured Lending	(i)		(ii)	
27.	Guarantees and Third Party Securities	(i)		(ii)	
	Chapter 3 – Card Services				
29.	Issue of Cards	(i)		(ii)	
30.	Terms and Conditions	(i)		(ii)	
31.	Fees and Charges	(i)		(ii)	
32.	Interest Rate	(i)		(ii)	
33.	Repayment	(i)		(ii)	
34.	Rights of Set-off	(i)		(ii)	
35.	Security of Cards / Authentication Factors	(i)		(ii)	
36.	Transaction Records	(i)		(ii)	
37.	Unauthorized Transactions	(i)		(ii)	
38.	Lost Cards/PINs	(i)		(ii)	
39.	Liability for Loss	(i)		(ii)	
40.	Treatment of Credit Balances	(i)		(ii)	
41.	Direct Mailing	(i)		(ii)	
	Chapter 4 – Payment Services				
42.	Cheques	(i)		(ii)	
43.	Cross-boundary Payments and Local Fund Transfers	(i)		(ii)	
44.	Other Payment Services	(i)		(ii)	
	Chapter 5 – Recovery of Loans and Advances				
46.	Debt Collection Activities	(i)		(ii)	
47.	Management of Debt Collection Agencies	(i)		(ii)	
	Chapter 6 – Electronic Banking Services				
48.	Disclosure for e-banking Services	(i)		(ii)	
49.	Security in relation to e-banking	(i)		(ii)	
50.	Reporting of Actual or Suspected Security Incidents	(i)		(ii)	
51.	Liability for Loss	(i)		(ii)	

PART I (A) - DETAILS (FOR SUBSIDIARIES AND AFFILIATED COMPANIES)

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.						If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.				
			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
	Chapter 1 – Relationship between Institutions and Customers												
5.	Terms and Conditions	(i)						(ii)					
6.	Fees and Charges	(i)						(ii)					
7.	Debt Recovery Expenses	(i)						(ii)					
8.	Collection, Use, Holding and Erasure of Customer Information	(i)						(ii)					
9.	Personal Referees	(i)						(ii)					
10.	Equal Opportunity	(i)						(ii)					
11.	Bank Marketing	(i)						(ii)					
12.	Annualised Percentage Rates	(i)						(ii)					
13.	Handling Customer Complaints	(i)						(ii)					
14.	Modifications to Bank Branch Services	(i)						(ii)					
15.	Management of Banking Activities	(i)						(ii)					
16.	Notification of Cyberthreats, Fraudulent Activities and other Customer Security Risks	(i)						(ii)					

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.						If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.				
			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
17.	Review of Application and Transaction Information	(i)						(ii)					
18.	Provision of Information in Non-paper Based Format	(i)						(ii)					
	Chapter 2 – Accounts and Loans												
19.	Opening of Accounts	(i)						(ii)					
20.	Closing of Accounts	(i)						(ii)					
21.	Operation of Accounts	(i)						(ii)					
22.	Rights of Set-off	(i)						(ii)					
23.	Deposit Accounts	(i)						(ii)					
24.	Loans and Overdrafts	(i)						(ii)					
25.	Residential Mortgage Lending	(i)						(ii)					
26.	Other Secured Lending	(i)						(ii)					
27.	Guarantees and Third Party Securities	(i)						(ii)					
	Chapter 3 – Card Services												
29.	Issue of Cards	(i)						(ii)					

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.						If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.				
			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
30.	Terms and Conditions	(i)						(ii)					
31.	Fees and Charges	(i)						(ii)					
32.	Interest Rate	(i)						(ii)					
33.	Repayment	(i)						(ii)					
34.	Rights of Set-off	(i)						(ii)					
35.	Security of Cards / Authentication Factors	(i)						(ii)					
36.	Transaction Records	(i)						(ii)					
37.	Unauthorized Transactions	(i)						(ii)					
38.	Lost Cards/PINs	(i)						(ii)					
39.	Liability for Loss	(i)						(ii)					
40.	Treatment of Credit Balances	(i)						(ii)					
41.	Direct Mailing	(i)						(ii)					
	Chapter 4 – Payment Services												

Section reference in current version			If a negative response is entered to Question (i) in the previous worksheet, please fill in the corresponding boxes below.						If a negative response is entered to Question (ii) in the previous worksheet, please fill in the corresponding boxes below.				
			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Action plan	Target completion date (DD/MM/YYYY)			Name(s) of subsidiary(ies) or affiliated company(ies)	Sub-section(s)	Description of non-compliance	Rectification completed (Y/N)	Filing date of incident reporting form (DD/MM/YYYY)
42.	Cheques	(i)						(ii)					
43.	Cross-boundary Payments and Local Fund Transfers	(i)						(ii)					
44.	Other Payment Services	(i)						(ii)					
	Chapter 5 – Recovery of Loans and Advances												
46.	Debt Collection Activities	(i)						(ii)					
47.	Management of Debt Collection Agencies	(i)						(ii)					
	Chapter 6 – Electronic Banking Services												
48.	Disclosure for e-banking Services	(i)						(ii)					
49.	Security in relation to e-banking	(i)						(ii)					
50.	Reporting of Actual or Suspected Security Incidents	(i)						(ii)					
51.	Liability for Loss	(i)						(ii)					

PART II – SUPPLEMENTARY QUESTIONS

1 a) **Is there an internal assessment system in your institution which monitors compliance with the Code (including compliance by the subsidiaries and affiliated companies) and enables your institution to identify areas of non-compliance?**

b) **If yes, please provide a brief description of this system and explain how the system helps your institution in assessing compliance with the Code in day-to-day operations (through e.g. mystery shopping, customer satisfaction survey, review of customer complaints, and provision of sales kits and scripts). If no, please provide your reasons and indicate how compliance is monitored.**

Description/
Explanation:

2 a) **Are there channels within the internal assessment system through which the identified areas of non-compliance (including those of the subsidiaries and affiliated companies) can be reported to the senior management of your institution?**

b) **If yes, please provide a brief description of the channel(s). If no, please explain how the senior management of your institution oversee and ensure compliance with the Code?**

Description/
Explanation:

3 a) **Are you satisfied that all new products and services (if any) launched by your institution (including the subsidiaries and affiliated companies) during the period under review comply with the Code?**

b) **Please also describe the system in place to ensure that all new products and services launched by your institution (including the subsidiaries and affiliated companies) comply with the Code.**

Description:

4 a) **Are you satisfied that appropriate training has been provided to relevant staff to enable them to understand the requirements of the Code?**

b) **Please provide a brief report on staff training, including the methods (e.g. classroom training), trainers (e.g. Compliance Department), frequency, materials used, and mechanism to monitor quality and effectiveness of the staff training about the Code and its requirements.**

Description:

5 a) **In relation to section 12.3 of the Code, are there any circumstances where your institution (including the subsidiaries and affiliated companies) has charged an APR of over 36%? If yes, please complete Q5(b) and Q5(c) below.**

b) **Please provide the range of APRs charged, the reasons why such high interest rates are considered not to be unreasonable or unfair and the controls in place (e.g. documentation, escalation to senior officers for review and sign-off) to ensure that the charging of such rates is justified in all the circumstances.**

Description:

c) **Please advise the proportion (in number and in %) of loans of your institution and of the subsidiaries and affiliated companies in respect of which APR>36% is charged.**

Description:

6 a) **Section 14 of the Code requires institutions to give reasonable notice, of not less than 2 months unless it is not practicable to do so, to customers before closing (including temporary closure where practicable), relocating or materially changing the scope of services of a branch. Please specify whether your institution (including the subsidiaries and affiliated companies) has, in any exceptional circumstances, given notice of less than 2 months before closing, relocating or materially changing the scope of services of a branch. If yes, please provide the details in Q6(b) below.**

b) **For each exceptional case, please provide justifications for not giving 2-months notice to customers before closing, relocating or materially changing the scope of services of the particular branch in question.**

Description:

7 a) **Section 29.1 of the Code requires that card issuers should act responsibly in the issue and marketing of credit cards and the setting of credit card limits, in particular to persons (such as full-time students) who may not have independent financial means. Please specify whether your institution has issued credit cards to, or launched marketing campaigns for credit cards targeted at, full-time students or other persons who may not have independent financial means during the reporting period. If yes, please provide in Q7(b) below further details on your system for ensuring compliance with section 29.1 of the Code.**

b) **Please describe the system in place to ensure compliance with the Code.**

Description: