# Application Form for Specification of Religious Ash Pagoda in Pre-cut-off Private Columbaria of Chinese Temples

Please read the Application Guide before filling in this application form.

Type of application								
Please tick <b>one box</b> to indicate the type of specified instrument that the <b>pre-cut-off columbarium</b> is applying for:								
<ul> <li>Application for licence and temporary suspension of liability</li> <li>Application for exemption and temporary suspension of liability</li> <li>Application for licence and exemption and temporary suspension of liability</li> <li>Others (Please specify :)</li> </ul>								

## Part A

Part I - Particulars of Temple under Application									
(1)	Address of temple (in English BLOCK lett	ers)							
	Flat/Room/Shop* Floor	Block							
	Building	Estate/Village*							
	No. and name of road/street ( <i>if more than one</i> <i>road/street are involved</i> , <i>please specify</i> )								
	DD/Lot number ( <i>if any</i> )								
	Sub-district	District							
	□ Hong Kong □ Kowloon	□ New Territories □ Islands							
*	Please delete where appropriate.								
#	Please put a " $\checkmark$ " in the appropriate box.								
(2)	Name of temple								
	Chinese								
	English (in BLOCK letters)								
(3)	Tel. No.								
(4)	Fax No.								
(5)	Email address								
(6)									
	(Chinese)								
	(English)								

(7)	Category of temple	Please choose one of the following:	
			Buddhism
			Taoism
			Others Please specify :
		Plea	se choose one of the following:
			Temples
			Buddhist monasteries
			Nunneries
			Taoist monasteries
(8)	God(s) worshipped		
(9)	Activities carried out in temple		'da chai'
	tempte		religious rituals
			selling of joss-papers/incense sticks/amulet
			sale and interpretation of oracles
			provision of vegetarian feasts
			religious lectures
			provision of free medicine
			others (please specify) :
		#	Please put a " $\checkmark$ " in the appropriate box.
		Go t	o Part II

# Part II - Particulars of the Management Personnel of the Chinese Temple Note

Particulars of management personnel	(1)	(2)	(3)
Chinese name	□ 先生 □ 女士	□ 先生 □ 女士	□ 先生 □ 女士
English name (in BLOCK letters)	□ Mr. □ Ms.	□ Mr. □ Ms.	□ Mr. □ Ms.
Position			
Residential Address			
Tel. No.			
Email address			

If space is inadequate, please use separate sheets. (□ Page\_\_\_\_\_is/are attached for supplement.)

Note : Please fill in information of at least one management personnel.

# Please put a " $\checkmark$ " in the appropriate box.

Go to Part III

	Part III(A) – Particulars of	of App	plicant (if the applicant is a natural	l person)
(1)	Name of applicant			
	Chinese			□ Mr.
	English (in BLOCK letters)			$\square$ Ms.
(2)	Tel. No.			
(3)	Mobile phone No.			
(4)	Fax No.			
(5)	Email address			
(6)	Residential address	(Chin	ese)	
		(Engl	ish)	
		(Liigi	1511)	
(7)	Information of contact persor	n (Plea	se leave blank if the applicant is also the c	ontact person)
	Name in Chinese			
	Name in English (in BLOCK			$\square$ Mr.
	letters)			$\square$ Ms.
	Position			
	Tel. No.			
	Mobile phone No.			
	Fax No.			
	Email address			
#	Please put a " $\checkmark$ " in the appropriate box.			
			Go to Part IV	

	Part III(B)—Particulars of Applicant (if the applicant is a body corporate)							
Part	Particulars of body corporate							
(1)	Name of body corporate							
	Chinese							
	English (in BLOCK letters)							
(2)	Type of body corporate	□ Limited company						
		□ Unlimited company						
		Body corporate under a <i>statute</i>						
		□ Others Please specify:						
(3)	Company Registration No.							
	(If the applicant is not a limit corporate)	ted company, please give other reference information of the body						
(4)	Address of Office							
	(Please fill in the registered of	fice address)						
	(Chinese)							
	(English)							
# ]	Please put a " $\checkmark$ " in the appropriate box	х.						

Particulars of the person authorised in writing to act for and on behalf of the body corporate (Authorised Person)								
(5)	Name of the authorised person							
	Chinese		□ Mr.					
	English (in BLOCK letters)		□ Ms.					
(6)	Position held in the body corpora	te						
(7)	Residential address							
	(Chinese)							
	(English)							
(9)								
(8)								
(9)	Mobile phone No.							
(10)	Fax No.							
(11)	Email address							
# Pl	ease put a " $\checkmark$ " in the appropriate box.							

(12)	<b>Information of contact person</b> (please leave blank if the authorized person is also the contact person)						
	Name in Chinese		□ Mr.				
	Name in English (in BLOCK		□ Ms.				
	Letters)		_ 1101				
	Position						
	Tel. No.						
	Mobile phone No.						
	Fax No.						
	Email address						

# Please put a " $\checkmark$ " in the appropriate box.

Go to Part IV

	Part III(C)—Particulars of Applicant (if the applicant is a partner in a partnership)							
Part	Particulars of partnership							
(1)	Name of partnership							
	Chinese							
	English (in BLOCK letters)							
(2)	<b>Business Registration Certifica</b>	ate No.						
(3)	Address of the place of busines	s (if applicable)						
	(Chinese)							
	(En aliah)							
	(English)							
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	chains of the partner authorise ehalf of the partnership (Authori	d by all partners in the partnership in writing rised Partner)	to act for and					
(4)	Name of the authorised partne	er						
	Chinese		Mr.					
	English (in BLOCK letters)		Ms.					
(5)	Position held in the partnershi	р						
# 1	Please put a " $\checkmark$ " in the appropriate box.							

(Chinese)					
(English)					
Tel. No.					
Mobile phone No.					
Fax No.					
Email address					
<b>Information of contact per</b> <i>contact person</i> )	rson (please leave blank if the authorised partner is a				
contact person)	□ Mr.				
<i>contact person)</i> Name in Chinese Name in English (in BLOCK	□ Mr.				
<i>contact person)</i> Name in Chinese Name in English (in BLOCK Letters)	□ Mr.				
<i>contact person)</i> Name in Chinese Name in English (in BLOCK Letters) Position	□ Mr.				
<i>contact person)</i> Name in Chinese Name in English (in BLOCK Letters) Position Tel. No.	□ Mr.				
<ul> <li><i>contact person</i>)</li> <li>Name in Chinese</li> <li>Name in English (in BLOCK Letters)</li> <li>Position</li> <li>Tel. No.</li> <li>Mobile phone No.</li> </ul>	□ Mr.				

	Part IV – Niche Information of Religious Ash Pagodas <sup>1</sup>															
	Niche Information						Ash interment capacity	Ash interment quantity								
No.	Columbarium Building	Floor	Floor	Floor	Floor	Floor	Floor	Room	Wall	Serial no. <sup>6</sup>	Remarks (single-urn, double-urn or	Situation as at COT <sup>2</sup>	Situation as at COT <sup>2</sup>	Situation as at the beginning of the enactment date <sup>3</sup>	Current situation (as at the time of submitting application)	To be permitted under exemption or license (if granted) and specified by Secretary for Home Affairs (SHA)
						others)	Max. no. of sets of ashes that may be interred in the niches	No. of sets of ashes interred	No. of sets of ashes interred <sup>4</sup>	No. of sets of ashes interred	No. of sets of ashes to be interred <sup>5</sup>					
							(a)	(b)	(c)	(d)	(e)					
			Total:													

Note 1: Both a printed copy (not smaller than A3 paper size) and a digital copy of the niche information in specified Excel format should be submitted. The niche information show in digital form should be the same as that shown in printed form. No personal particulars and signature are required to be shown in the digital copy.

Note 2: "Cut-off time" (COT) means 8 a.m. on 18 June 2014.

Note 3: Enactment date means 30 June 2017.

Note 4: All niches have been checked and it is confirmed that no ashes have been interred in non-pre-cut-off niches.

Note 5: This refers to the number of sets of ashes proposed to be permitted to be interred in the RAP(s) if the exemption is granted and the columbarium and the RAP(s) is/are specified by SHA.

Note 6: Niche information should be listed in the order of the serial number of the niche. For a number of consecutively numbered niches which are of the same type and whose information to be shown in all the cells on the right side in this table is the same, their information can be merged and shown in a single row. The applicant should list the serial numbers of the niches concerned here, and indicate in the Remarks column if the niches concerned are single-urn or double-urn or others (the number of sets of ashes that may be interred in each niche should be specified).

If space is inadequate, please use separate sheets. (
Page\_\_\_\_\_is/are attached for supplement.)

## **Registration Form for Religious Practitioners of Chinese Temples** (Note: To submit information of each practitioner as required in Part B)

	Part I – Personal Particulars of Practitioner							
(1)	Name in Chinese							
(2)	<b>Name in English</b> (in BLOCK letters)							
(3)	Sex	<ul><li>Male</li><li>Female</li></ul>						
(4)	Identification Document	□ HKID No.						
		Passport No.						
		□ Copy of proof attached						
(5)	Date of birth (dd/mm/yyyy)							
(6)	Tel No.							
#	Please put a " $\checkmark$ " in the appropriate box.							

Temple currently resides and serves			
Name of temple	Chinese		 
	English		
Address			
(Chinese)			
(English)			
Copy of reside	ential proof attached		
# Please put a "✓" i	n the appropriate box.		
		Go to Part II	

Part II - Particulars of Becoming a Religious Practitioner						
(1)	Religious name					
Details of becoming a religious practitioner						
(2) Date of becoming a religious practitioner (dd/mm/yyyy)						
(3)	Temple of becoming a religious practitioner					
	Name of the temple	Chinese				
		English				
Ad	Address	(Chinese)				
		(English)				

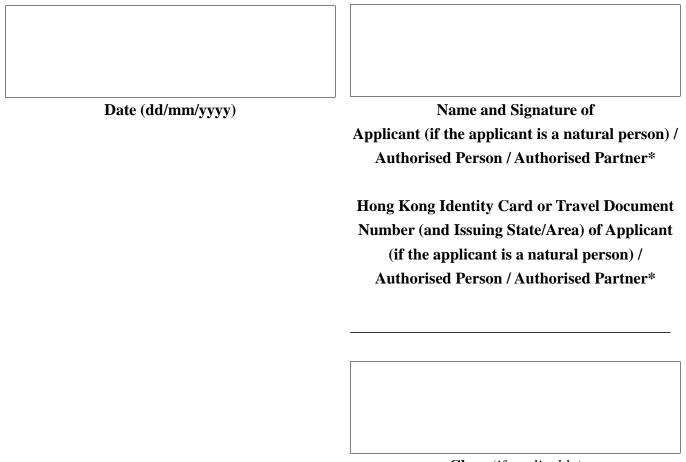
 $\Box$  Copy of proof attached (e.g. documents of ordination, induction, recognition and information of the temple)

### Declaration

I / The body corporate / All partners in the partnership\* understand(s) that it is my / our\* responsibility to ensure that the operation of columbarium business at the premises under application is in compliance with all legal and Government requirements. I / The body corporate / All partners in the partnership\* will seek legal and professional advice if necessary.

I / The body corporate / All partners in the partnership\* understand(s) that it is an offence to provide information that is false or misleading in a material particular in, or in connection with, an application made under the PCO in respect of a columbarium or to furnish the Director, an authorised officer or a public officer with information under the PCO knowing that it is false or misleading in a material particular. Having regard to the above, the Private Columbaria Licensing Board may revoke the licence, exemption or temporary suspension of liability in future. Any person who commits the above-mentioned offence(s) under section 99 of the PCO is liable on conviction to a fine of \$500,000 and to imprisonment for 2 years.

I / The body corporate / All partners in the partnership\* confirm that all information, including supporting documents, provided in respect of this application is accurate and true.



Chop (if applicable)

\* Please delete where appropriate.

#### Collection of Personal Data in Connection with Applications for Specification of Religious Ash Pagoda in Columbaria of Chinese Temples (In accordance with the Personal Data (Privacy) Ordinance)

#### **Statement of Purpose**

#### (1) **Purpose of Collection**

The personal data provided by means of this form will be used by the Home Affairs Bureau and relevant staff and public officers for -

(a) handling applications for specified specification of religious ash pagoda in columbaria of Chinese temples and related matters; and

(b) facilitate communication among staff of the Home Affairs Bureau, other government departments and you.

The provision of personal data by means of this form is voluntary. However, if you do not provide sufficient information, the Home Affairs Bureau may not be able to process your application.

#### (2) Class of Transferees

The personal data which you have provided by means of this form may be disclosed to other government departments and agencies in pursuance of the purposes mentioned in Point (1) above. The personal data may also be disclosed to other government departments for law enforcement purposes.

#### (3) Access to Personal Data

You have a right to request access to and correction of the personal data provided in accordance with Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data which you have provided by means of this form. A fee may be imposed for complying with a data access request.

#### (4) **Enquiries**

Enquiries concerning the application, including the personal data collected by means of this form, should be addressed to the officer in charge of the Home Affairs Bureau as below.

Home Affairs Burau Civic Affairs Division (3) 13/F, West Wing, Central Government Offices, 2 Tim Mei Avenue, Tamar, Hong Kong (Attention: Executive Officer(3)2) Telephone number: 3509 8139 Email address: cad3@hab.gov.hk