

ACCOUNTING AND FINANCIAL REPORTING COUNCIL

PERSONAL DETAILS AMENDMENT FORM FOR A NON-CPA (PRACTISING) REGISTERED AS AN ENGAGEMENT QUALITY CONTROL REVIEWER (“EQCR”) (FORM PIE-EQCR(A))

IMPORTANT:

Personal Data (Privacy) Ordinance: The information requested in this notification form may include personal data as defined in the Personal Data (Privacy) Ordinance (Cap. 486). Please refer to the [“Personal Information Collection Statement”](#) which sets out the policies and practices of the Accounting and Financial Reporting Council (“AFRC”) with regard to any personal data provided.

The requirements and procedures for the notification of change in personal details of a non-CPA (practising) registered as an EQCR are set out in the [“Guide for the Registration of PIE Auditors”](#) (“Guide”). Please read the Guide before completing this notification form.

SUBMISSION OR ENQUIRIES:

The completed notification form should be sent with all supporting documents by post to the AFRC:

Policy, Registration and Oversight Department
Accounting and Financial Reporting Council
10/F, Two Taikoo Place
979 King's Road, Quarry Bay
Hong Kong

For any enquiry, please contact the AFRC at +852 3586 7800 or e-mail registration@afrc.org.hk.

Name of Registered PIE Auditor:	_____
Practice unit registration no.:	_____
Full name of the EQCR in BLOCK letters:	_____
Identity document no.:	<input type="checkbox"/> Hong Kong identity card no.: _____
	<input type="checkbox"/> China identity card no.: _____
	<input type="checkbox"/> Passport no.: _____

Change in particulars:

- (i) Change of name: *(Please provide a CERTIFIED copy ^{Note ①} of the new identity document.)*
- New full name in BLOCK letters: _____
- New Chinese name, if any: _____
- (ii) Change of contact details:
- Email address: _____
- Phone no.: _____
(Please provide the country code and area code.)
- Correspondence address: _____
- (iii) Change of professional qualification: *(Please provide a CERTIFIED copy ^{Note ①} of the membership certificate of your new professional qualification.)*
- Name of the accountancy body of which you have newly become a member: _____

Declaration and undertaking:

(Please ✓ the box below)

- I hereby:
- declare that the above information is true and complete to the best of my knowledge and belief.
 - confirm that all documents provided are true and correct copies of the original, true documents. I understand that providing false documents is a violation of both criminal and civil law, for which I will be held responsible.
 - undertake to notify the AFRC of any future change of the above information, in particular, my contact details as soon as practicable.

Signature of EQCR

Date
(dd/mm/yyyy)

Note ①

Certification of documents – All documents in relation to the application to be submitted to the AFRC should be originals or certified true copies of the originals certified by any of the following persons (self-certification will not be accepted):

- (a) A certified public accountant of HKICPA. Full name with HKICPA membership no. and contact details should be provided for future communication.
- (b) A legal practitioner. Full name with contact details should be provided for future communication.
- (c) Government District Officer (through statutory declaration)