

P06-CITY-003 | Hong Kong: Research on Adapting Urban Institutions to the AGI Era

City-focused policy scenario and research proposal | HCV reframed from a social operating system to a testable tool for additional collaboration

V1.1 | 2026-09-03 | Zijun Fu | Civilization Leap Research Group

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Note: This is a controlled rewrite based on the identity/version relationships frozen in C5-A1 and the boundaries concerning facts, rights, jurisdictions and real-world effect frozen in C5-A2. It does not establish that any government, institution, enterprise or city has accepted, authorized, initiated, partnered on or implemented this proposal. All specific experiments, data processing, financial arrangements, connections to public resources and cross-jurisdictional mechanisms require separate review once the actual entities, applicable laws, regulatory permissions, budgets and procedures for affected persons have been established.

1. The issue and real-world context

Hong Kong has mature systems of rule of law, international finance and professional services, and is advancing the Northern Metropolis, San Tin Technopole and digital-government infrastructure. These conditions make Hong Kong a suitable setting for studying how public collaboration and social resilience can be improved through auditable arrangements that participants can leave, in a high-density, cross-border and highly financialized urban environment. They do not mean that an “HCV national sandbox,” specific legislation or conversion mechanisms already exist.

2. Redefining HCV

In this paper, HCV is not a currency, security, credit score, right to govern or qualification for public services. It is limited to a “mechanism for recording and providing feedback on contributions to voluntary projects”: it records contributions to community, research, ecological, cultural and cross-border collaboration that are verified under explicit rules, and studies whether non-exclusive incentives can improve the quality of collaboration.

3. Public boundaries that must not be crossed

- HCV balances must not serve as a direct eligibility threshold or basis for prioritizing public-housing waiting lists, basic healthcare, school places or basic educational opportunities.
- General eligibility to participate in public governance, voting rights, statutory rights and identity status must not be linked to HCV.
- HCV must not presuppose conversion to Hong Kong dollars, bond issuance, the creation of an exchange or the formation of an asset class. Any financial experiment requires a separate determination under the applicable regulatory framework.
- Personal data must be subject to purpose limitation, minimum necessity, authorization, withdrawal, retention limits and security audits. “Contribution assessment” must not produce comprehensive behavioral profiles.

4. Low-risk modules recommended for priority research

Module	Research question	Boundary
Community collaboration	Do shared spaces and intergenerational or cross-cultural mutual support improve social connections?	Rewards are limited to voluntary additional experiences and do not alter fundamental public rights
Urban ecology	Do rooftop growing, resource circulation and community food networks improve resilience?	Evaluate actual environmental performance
Educational projects	Does university students' engagement with real public problems enhance capabilities and civic participation?	No linkage to admissions, degrees or eligibility for basic courses
Health promotion	Are voluntary health goals and non-medical benefits effective?	Clinical priorities remain entirely independent
Cross-border research	Study data and service interoperability under clearly defined jurisdictions and purposes	Project-by-project approval, minimal data, and mechanisms for withdrawal and deletion

5. Evidence discipline

Precise figures from the earlier paper, including a “99.7% probability of elimination” and a “98.2% probability of protection,” are removed in their entirety from the public candidate’s main text unless accompanied by data, code, parameters and independent replication. Claims about AGI risk are retained only as hypotheses about mechanisms requiring further research, not as definite predictions.

6. Communication with governments and institutions

Mobilizing language such as “launch immediately,” “final submission” and “a third opportunity on the scale of nation-building” is reframed throughout as the authors’ recommendations. A more appropriate first step is not to request authorization for a complete social operating system, but to invite experts in law, data, finance, social policy and AI safety to jointly assess whether a number of low-risk research modules are worth pursuing.

7. Recommended minimum next steps

- Develop an interdisciplinary research agenda rather than first establishing an HCV system.
- Select one or two entirely voluntary community or research projects unrelated to fundamental rights for experiments from which participants can withdraw.
- Publish rules for data governance, appeals, audits, stopping and reporting failures in advance.
- Any expansion must be conditional on an independent evaluation demonstrating net benefits and no unacceptable adverse effects on rights.

External evidence and citation boundary

The following sources are used only to verify the real-world context and jurisdictional boundaries explicitly identified in this paper. They do not constitute evidence that the relevant institutions have endorsed, accepted, authorized or implemented this proposal. Retrieval date: 2026-09-03.

[1] Hong Kong Digital Policy Office | iAM Smart.

https://www.digitalpolicy.gov.hk/en/our_work/data_governance/common_data_platforms/iam_smart/ — Verifies the existence of unified digital-identity and one-stop digital-service infrastructure in Hong Kong; it does not support claims that HCV integration, contribution scoring or uses for allocating public resources have been approved.

[2] Government of the Hong Kong Special Administrative Region | 2026-27 Budget: Northern Metropolis.

<https://www.budget.gov.hk/2026/eng/budget36.html> — Verifies progress on development related to the Northern Metropolis and San Tin Technopole; it does not support claims that an “HCV national sandbox” or specific HCV legislation already exists.

Evidence classification

The theoretical propositions and institutional designs in this paper are the authors’ research claims. Real-world facts are limited to the background supported by the sources above. Future institutional designs, timelines, pilot scales, funding arrangements and policy pathways are scenarios or recommendations, not events that have occurred or authorizations that have been granted.

Version signature

Source-version signature (retained from the source)

Permanent ID: P06-CITY-003

Release status: CURRENT CONTROLLED PUBLIC RESEARCH / PUBLIC RELEASE

Version: V1.1_SIGNED

Signed date: 2026-09-03

Parent candidate SHA-256 (C5-A3): fdd34d64def198d219bc04029171ec7d8a23b8c49b2738c3bcbc5cbf392cf5c6

Signed input SHA-256 (C5-A4): 105b7ed4ee72eab8805fd7d1f5f729bea56bf574374b2a7d708b59105d62d273

Public publication slug: p06-city-003