



R-1

(03-2008)

Republic of the Philippines
SOCIAL SECURITY SYSTEM
EMPLOYER REGISTRATION

Please read instructions at the back. Print all information in capital letters and use black ink.

PART I - EMPLOYER MAIN OFFICE DATA

Form section for Part I: Employer Main Office Data. Includes fields for Name of Business/Employer, Business Address, Town/District, Start of Operation, Number of Employees, Nature of Business, Area Code, Telephone Number, TIN, E-mail Address, Area Code, Fax Number, Legal Personality, Name of Owner/Managing Partner/President/Chairman, SS Number, and Position Title.

PART II - EMPLOYER BRANCH OFFICE DATA

Form section for Part II: Employer Branch Office Data. Includes fields for Employer Number, Name of Business/Employer, Branch Business Address, Town/District, Start of Operation, Number of Employees, Area Code, Telephone Number, TIN, E-mail Address, Area Code, Fax Number, and Name and Position Title of Highest Ranked Branch Official.

PART III - CERTIFICATION

I CERTIFY TO THE CORRECTNESS OF THE ABOVE INFORMATION.

Printed Name Signature Official Designation Date

FOR SSS USE

Form section for Part III: Certification and SSS Use. Includes fields for Employer Registration Plate, Postal Code, Date of Coverage, Business Code, Document/s Submitted, Remarks, Processed By/Date, Reviewed By/Date, Received By/Date, Approved By/Date, Encoded By/Date, and Data Controlled By/Date.

## **INSTRUCTIONS/REMINDERS**

- Fill out this form in two (2) copies and accomplish appropriate parts as follows:

**For Employer Main Office**                    -            **Parts I and III**  
**For Employer Branch Office**               -            **Parts II and III**

- Submit this form to the nearest SSS office with accomplished Employment Report (SS Form R-1A), Specimen Signature Card (SS Form L-501), and a sketch of your business address.
- The form shall be supported by applicable required documents and signed by authorized signatories:

### **3.1 If Main Office**

<u><b>Legal Personality</b></u>	<u><b>Authorized Signatory</b></u>
Single Proprietorship	Owner or, in his absence, the legal spouse or, in their absence, any representative with Special Power of Attorney (SPA)
Partnership	Managing Partner
Corporation	President, Chairman or Corporate Secretary
Cooperative	Chairman or Corporate Secretary
Non-stock / Non-profit corporation	President, Chairman or Corporate Secretary
Manning Agency with Foreign Principal	President, Chairman or Corporate Secretary

### **3.2 If Branch Office**

<u><b>Required Document</b></u>	<u><b>Authorized Signatory</b></u>
Certificate of Operation from the main office signed by the President, Chairman or Corporate Secretary	Highest ranked official of the branch

- Pay the fee of P165.00 for Employer Registration Plate at the SSS or at any SSS-accredited bank and submit validated Miscellaneous Payment Return (SS Form R-6) or SS Form R-6 and Special Bank Receipt with this form.
- Notify SSS of any changes in data and the status of the employer's business operations to avoid being billed for period/s when no contributions are due. Fill up and submit Employer Data Change Request (SS Form R-8) supported by the required document/s, in any of the following cases:
  - Temporary suspension, permanent cessation or merger/consolidation of business operations; and
  - Changes in the employer's data such as business name, address, ownership, legal personality and other relevant information
- Request for replacement of the Employer Registration Plate, in case of loss or change of business name and/or address that will result to change of SSS branch ownership, using the Application for Employer Registration Plate.
- Always use your 13-digit Employer Number in all your transactions with the SSS.