

**PART II - TO BE FILLED OUT BY SSS**

**A. TRANSACTION RESULTS**

**REQUEST**

- Cancellation of Multiple SS Numbers
- Consolidation of Contributions
- Correction/Refund/Posting/Adjustment of Contributions
- Certification of Membership/Non-Membership
- Copy of Membership Record/s
- Deletion of Entry in Employment History Record
- Encoding/Correction of Date of Coverage
- Manual Verification
- Print-out of Computer Records
- Others

**VERIFICATION**

- Contribution
- Date of Coverage
- Employer Number
- SS Number De. 46 21164-8
- Flexi-Fund Premiums
- SSS P.E.S.O Fund Premiums
- Loan Balance
- Loans/Benefits Eligibility
- Status of:
  - Loan Application
  - Benefits Claim Application
  - Application for UMID Card
  - Data Change Requested
  - Others

**B. TO BE FILLED OUT BY DEPARTMENT/BRANCH CONCERNED**

VERIFIED/PROCESSED BY

HEIDE MARIE DEL ROSARIO  
SENIOR CLERK, SSS STALLION BRANCH

021126

RELEASED BY

SIGNATURE OVER PRINTED NAME	DEPT./BRANCH	DATE & TIME	SIGNATURE OVER PRINTED NAME	DEPT./BRANCH	DATE & TIME

**INSTRUCTIONS**

- Fill out this form in one (1) copy and accomplish appropriate parts as follows:
  - Filed by member
    - Member to fill-out PART I (a to c)
    - Member to fill-out "Employment History" (Part I (b)) only if requesting for the following:
      - Cancellation of Multiple SS Number
      - Consolidation of Contributions
      - Correction/Refund/Posting/Adjustment of Contributions
      - Deletion of Entry in Employment History Record
      - Encoding/Correction of Date of Coverage
      - Manual Verification
  - Filed by authorized representative or company representative
    - Member to fill-out PART I (a to d)
    - Authorized Representative or company representative to fill out PART I (d)
- Place a checkmark on the applicable box.
- Always indicate "N/A" or "Not Applicable", if the required data is not applicable.
- Present identification document/s.
  - Filed by member
    - Social Security (SS) Card or Unified Multi-Purpose ID (UMID) Card or Passport or Professional Regulation Commission (PRC) Card or Seaman's Book or Driver's License or two (2) valid IDs (both with signature and at least one (1) with photo)
  - Filed by authorized representative
    - Representative's SS Card or UMID Card or Passport or PRC Card or Seaman's Book or Driver's License or any two (2) valid IDs (both with signature and at least one (1) with photo)
    - Member's SS Card or UMID Card or Passport or PRC Card or Seaman's Book or Driver's License or any two (2) valid IDs (both with signature and at least one (1) with photo)
  - Filed by company representative
    - Authorized Representative Card (ACR)
    - Original member's SS Card or UMID Card or Passport or PRC Card or Seaman's Book or Driver's License or any two (2) valid IDs (both with signature and at least one (1) with photo)
- The member granting authority to the authorized representative or company representative in this form shall be held liable under all circumstances for any false statement, misrepresentation, fraud made by the authorized representative or company representative in all transactions with the SSS.
- This form can be downloaded thru the SSS Website at [www.sss.gov.ph](http://www.sss.gov.ph).