

Republic of the Philippines

SOCIAL SECURITY SYSTEM

SICKNESS & MATERNITY BENEFITS PAYMENT THRU THE BANK FORM

THIS FORM IS NOT FOR SALE

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PRINTED NAME OF AUTHORIZED SIGNATORY/IES

SIGNATURE

INSTRUCTIONS AND REMINDERS

- 1. Fill out this Form in two (2) copies without erasures and alterations.
- 2. Place a checkmark on the applicable box.
- 3. Always indicate "N/A" or "Not Applicable", if the required data is not applicable.
- 4. Use this Form for any of the following purposes:
 - Enrollment enrollment of the employer in the Sickness & Maternity Benefits Payment thru Bank program
 - Exemption employers who prefer to receive their reimbursements through checks
 - Amendment changes or amendments in the employer's bank account information
 - Cancellation cancellation of employer's enrollment in the program due to closure of employer's bank account or employer has ceased or temporarily suspended its operation
- 5. For Application for Enrollment and Amendment, accomplish Part I (A to C) of the Form and submit to your designated SSS-accredited bank. The bank shall certify the correctness of the bank account information and shall forward the Form to SSS.

The bank account signatory/ies specified in this Form shall be the official designated by the employer or the company's Board of Directors as its authorized signatory as appearing in the bank's records.

- 6. For Application for Exemption and Cancellation, accomplish Part I (A & C) of the Form and submit to any SSS branch office.
- 7. The Form shall be signed by the authorized company official who is certified by the employer in the Specimen Signature Card (SSS Form-L501) as the designated signatory.
- 8. Status of the enrollment/exemption/amendment/cancellation in the program may be verified through the Online Inquiry accessible from MY.SSS web account of the SSS Website at http://www.sss.gov.ph
- Upon approval of the enrollment to the program, all sickness and maternity reimbursements shall be credited to the employer's bank account. Details of payment can be accessed through the SSS Web Inquiry System and through the Online Inquiry accessible from MY.SSS web account of the SSS Website at http://www.sss.gov.ph
- 10. Notify SSS of any change in the bank account information or closure of the bank account immediately by accomplishing this form, to avoid delay in the processing of reimbursement claims.
- 11. In case of revocation of bank's accreditation with SSS, the employer shall be notified by SSS to open an account at other SSS-accredited bank under this program to avoid delay in the processing of reimbursement claims.
- 12. In case of bank closure or bank holiday, the benefit reimbursements remitted to the employer's bank account shall be governed by the banking rules and regulations.

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OR REJECTED APPLICATION	mor bas evaler, mo	l ava ra poblivotej a				
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WARNING

ANY PERSON WHO MAKES ANY FALSE STATEMENT IN THIS APPLICATION OR SUBMITS ANY FALSIFIED DOCUMENT IN CONNECTION WITH THE APPLICATION WITH THE SSS SHALL BE LIABLE CRIMINALLY UNDER SECTION 28 OF R.A. 8282 OR UNDER PERTINENT PROVISION OF THE REVISED PENAL CODE OF THE PHILIPPINES.