

Instructions

Fill the form in ENGLISH Block letters.

- 1.1 Write the registered name of the employment.
- 1.2 Write the Employer Number with Zone Code.
- 1.3 Write the Postal Address of the employment.
- 1.4 Write the nature of Industry/Enterprise according to the
- 2.1 Write the total number of employees as at the date of registration under e-Return System.
- 2.2 Write the total number of employees under Shop & Office Act as at the date of registration under e-Return System.
- 2.3 Write the total number of employees under Wages Boards Act as at the date of registration under e-Return System.
- 2.4 Write the total number of employees under Other categories as at the date of registration under e-Return System.
- 03 Write the number of files (categories) send under one employer number per month (If any).
ex-If it sends as a one file (including all the staff),the number should be "01".
If it sends under two categories such as "Executive" & "Non-Executive",the number should be "02".
- 4.1 Write the names of 2 authorized contact officers of the employment.
- 4.2 Write the contact numbers of the officers.
- 4.3 Write the fax number of the employer.
- 4.4 Write the main e-mail address of the employer.(If mode of e-return is "e-mail",Please write the e-mail address by which the e-returns will be sent)
- 4.5 Write two optional e-mail addresses of the employer other than than the main e-mail address.
- 05 Select the mode of payment by which the employer pay monthly contribution, Such as "Cheque","Cash"or "Direct Debit" (Put a tick mark (√) in the relevant cage) or specify if pay by other modes of payments which introduce by superintendent (EPF) from time to time
- 06 Select the mode of sending e>Returns.Such as EPF e-mail / website and specify if send through an other mode which introduce by superintendent (EPF) from time to time.
- 07 Write the commencing month and the year for sending e>Returns.
- 08 Place the signature and the official stamp of the authorized officer at the end of the form.