



# SOCIAL SECURITY FUND REGISTRATION OF EMPLOYER

Form : RE\_2

1. Name : Mr. / Mrs / Miss. ....

2. Trade Name .....

3. Tel. No..... Email Address .....

4. Mailing Address .....

5. Type of activity (be specific) .....

6. a) Date trade, business or work commenced Day..... Month..... Year.....

b) Date employment commenced Day..... Month..... Year.....

7. Date wages were first paid Day..... Month..... Year.....

8. Approximate No. of employed persons Male ..... Female .....

9. a) Legal status of employer :

i) Sole Trader

vii) Committee

ii) Partnership

viii) Association

iii) Company

ix) International Government

iv) Government Ministry / Department

x) Statutory Board

v) Club

xi) Other Legal Entity (specify)

vi) Trade Union

(.....)

b) Submitted herewith is Documentation in support of 9 a) above. (i.e. appropriate ID; Certificate of Incorporation;)

Other Documents (specify) .....

10. Is this a Business Enterprise which was acquired from someone? Yes  No

(If "Yes" complete 11 - 13)

11. Name of previous Business or Owner .....

12. Address of previous Owner .....

13. Date of Acquisition 

dd	mm			yy	

14. Is your payroll on computer Yes  No

15. Print Name(s).....

16. Position / Post.....

17. a) Signature..... Date 

dd	mm			yy	

b) Signature..... Date 

dd	mm			yy	

**NOTES**

Every employer must, as soon as he engages any employee, ensure that such person completes an application form (RE\_1) for registration with the Social Security Office unless the employed person produces evidence that he / she is already registered.

Every employer to whom the Social Security Act and Regulations apply is required to register with the Director of Social Security within seven (7) days of the date on which he becomes an employer.

Any person who ceases to become an employer, or resumes as an employer, or changes his business name or address, must forthwith notify the Director of Social Security.

**PENALTY** : If any person contravenes or fails to comply with any of the Social Security (Registration) Regulations he / she shall be liable on summary conviction to a fine not exceeding One Hundred Dollars (\$100.00) for each such offence, or, where the offence consists of continuing any such contravention or failure after conviction thereof, to a fine of One Hundred Dollars (\$100.00) for each day on which it is so continued.

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**FOR OFFICIAL USE (INSTRUCTIONS, NOTES etc.)**

Employer's Registration No. 

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Employer's Guide Issued - Yes  No  If No, give reason .....

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.....  
Registration Officer's Name ..... Signature ..... 

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dd mm yy

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Verification Officer's Name ..... Signature ..... 

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dd mm yy

Date of Inspector's visit 

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dd mm yy

.....  
Inspector's Name ..... Signature .....