

# EMPLOYER ONLINE ACCESS APPLICATION

## INSTRUCTIONS

- Use this form to appoint or amend the users from your organization who are authorized to upload pension contribution files to the CSS Pension Plan website (myCSSPEN). Return the completed form to the mailing address, fax number or email address above.
- The CSS Pension Plan will send any new users a personal username and temporary password by regular mail.

## EMPLOYER INFORMATION

Employer name:

Employer #:

## AUTHORIZED USERS

### Person authorized to add or make changes to authorized users:

(E.g: Board President, Plant Manager, General Manager, CEO, etc. This person cannot be the same as the Primary Authorized User.)

Name (first and last) and title: \_\_\_\_\_

Email address: \_\_\_\_\_

Direct telephone number (including area code): \_\_\_\_\_

### User additions/changes authorized by:

Date: \_\_\_\_\_

### Primary Authorized User: (This person is authorized to upload pension contribution files on a regular basis.)

ADD     DELETE     UPDATE

Name (first and last) and title: \_\_\_\_\_

Business mailing address: \_\_\_\_\_

Business email address: \_\_\_\_\_

Direct telephone number (including area code): \_\_\_\_\_

### Backup Authorized User: (This person is authorized to upload pension contribution files if the primary user is not available.)

ADD     DELETE     UPDATE

Name (first and last) and title: \_\_\_\_\_

Business mailing address: \_\_\_\_\_

Business email address: \_\_\_\_\_

Direct telephone number (including area code): \_\_\_\_\_

*To name additional Backup Authorized Users, please complete an additional sheet(s).*