

EMPLOYER ONLINE ACCESS APPLICATION

INSTRUCTIONS

- Use this form to appoint or amend the users from your organization who are authorized to upload PDF files and/or 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 by email.

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 Authorized User.)

Name (first and last) and title:

Email address:

Direct telephone number (including area code):

User additions/changes authorized by:

Signature: Date:
(dd/mm/yyyy)

Authorized User:

ADD DELETE UPDATE

Name (first and last) and title:

Business mailing address:

Business email address:

Direct telephone number (including area code):

Authorization level:

Contribution files PDF files

Authorized User:

ADD DELETE UPDATE

Name (first and last) and title:

Business mailing address:

Business email address:

Direct telephone number (including area code):

Authorization level:

Contribution files PDF files

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