BSO Welcome

Business Services Online Website Index Employer Information	Home BSO	Questions? Welcome Page	How to Contact Us	Search	
Employer Information	BSO	. Bearing earlies commission with a second of the second o			
Employer Information					
		Software/Hardware Requirements			
Publications Software Feedback Navigation Security Policy BSO News Enter your e-mail address during BSO Registration and receive important filing information. Because your time is valuable, we will only e-mail you about 4 to 6 times a year – for instance, when it's time to change your password or when changes are announced for the new filing season. Already registered? Login and select Update your Contact Information.	BSO is a suite Administration added in the fu Login If you have alre you need to co Registrat If you would lik password, sele (EIN) to reque employed, yo BSO and Re Have a quest Time to speak For TDD/TTY Employer Se	a. You must be a registere ature. eady registered and need amplete your phone regist ion e to register for BSO, and ect Registration. Note: Yeest access to the full rail and may request limited a registration: eion? Call 1-800-772-627 with Employer Customer call 1-800-325-0778. ervices Liaison Officers	d need to obtain a Personal Ident ou must have an Employer Ide nge of Business Services Onli occess without an EIN <u>Apply F</u> O Monday through Friday, 7:00 a	s. Other services may be a your BSO account, or if ification Number (PIN) and entification Number ne. If you are self-or EIN.	Your browser settings must accept cookies. We recommend using a Windows-based PC to use our Intern services. Using Macintosh Computer Web TV, or other non Windows-base PCs may cause inconsistent results. Encryption Notice: If your browser can not use 128-bit encryption, you will need to upgrade before you can use our Internet applications. Online Services Are Available: Monday-Friday 5 AM - 1 AM Saturday 5 AM - 11 PM Sunday 8 AM - 11 PM All times EST

General Login Attestation



BSO Login



BSO Complete Phone Registration

Social Security's Business	vices Online Services Online (BSO)
■ BSO Help	
and the p	
Business Services Online Co	
A Personal Identification Number (PIN) and password are required to registration process. You must now self-select your personal password	use Business Services Online, Your PIN was issued during the
To self-select a password, enter your PIN, First Name, Last Name, So then select Complete Phone Registration.	cial Security Number, Date of Birth, EIN and Password (two time
Personal Identification Number (PIN):	
First Name:	
Last Name: [
U. S. Social Security Number: [(leave blank if you DO NOT have an SSN)	
Date of Birth (mmddocyy)	
Employer Identification Number (EIN): (leave blank if you DO NOT have an EIN)	- The second
Your password must be eight characters long and be a combination of letter and at least one number in your password.	letters and numbers. For example, there must be at least one
Enter Password:	and the second second
Reenter Password:	
Please remember your password. To ensure your privacy, no one of you start the process over again, but we cannot access your password Select this link to return to the Login page.	
Complete Phone Regist	Cancel
Paperwork Reduction Act Statement This information collection meets the clearance requirements of 44 U.S.C. § 35 You do not need to answer these questions unless we display a valid Office of about 2 minutes to read the instructions, gather the facts, and answer the ques complete the form to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. Se completed form.	Management and Budget control number. We estimate that it will take tions. You may send comments on our estimate of the time needed to
Privacy Act Notice The Social Security Administration (SSA) is allowed to collect the information o the Privacy Act of 1974 (5 U.S.C. § 552a). We need this information to registe verifying Social Security Numbers and to contact you, if necessary. Giving us to be able to provide this service to your company. SSA may also use the informal including to ensure the appropriate use of the service.	r your company and your authorized employee(s) to use our system for his information is voluntary. However, without the information we will not
5.5°0 to 10°	
Have a question? Call 1-800-772-6270 to speak For TDD/TTY call 1	

Phone Registration Complete



BSO Home Page



BSO Home | BSO Information Links | Contact SSA | Keyboard Navigation | Logout

Welcome to Business Services Online (BSO), NAME

Your BSO Registration Password will expire on 09-30-2005.

You must change your password before this date to prevent it from expiring.

Consent Based SSN Verifications:

- Submit an Electronic File for SSN Verification Submit a file containing Names and Social Security Numbers to be verified by Social Security.
- ► View Status and Retrieval Information View the current status of a submission.

Registration Services:

Request Access to BSO Services

Select the option or options that best describe the type of business you plan to conduct with Social Security. Once you have completed your request, an activation code may be mailed.

Activate Access to BSO Services

Enter activation code(s) to gain full access to requested BSO service(s).

Re-Request Activation Codes

Re-request activation code(s) if you have not received or have misplaced them.

Remove Access to BSO Services

Disable your access to BSO services.

Deactivate your PIN

Deactivate your Personal Identification Number (PIN).

Change your Password

Your password must be changed at least once a year in order to keep your PIN active.

Update your Contact Information

Update or change your registration information - correct address, phone number, company phone number, or e-mail address.

CBSV Attestation Page

(Top Half)



CONSENT BASED SSNVS VERIFICATION ATTESTATION

Form Approved: OMB No. XXXX

Proper Use of This Service

As noted in the User Agreement your company has signed,

- SSA will verify SSNs solely for the purpose(s) specified on the individual consent forms associated
 with the verification requests. Your company may use the verified SSN only for the purpose(s)
 specified by the individual signing the consent form. Exceeding the scope of the consent could
 violate state or Federal law and subject the requesting party to legal consequences.
- SSA will provide SSN verification information only about individuals from whom your company has
 obtained valid consent forms
- Your company shall protect the confidentiality of consent forms (and the information contained on them) and protect the associated record of SSN verification.
- Information provided by SSA in response to an SSN verification request may not be used for any
 other purpose other than the reason identified on the previously approved consent form.
- Notwithstanding any other provision of this agreement, SSA reserves the right to unilaterally
 suspend access to these services if SSA concludes that your company has failed to properly obtain
 consent or otherwise failed to follow the terms of the agreements associated with this service.
- Anyone who knowingly and willfully uses this service to request or obtain information from SSA
 under false pretenses violates Federal law and may be punished by a fine or imprisonment or
 both.

User Certification for use of CBSV - Please Read Carefully!

I certify that:

- I have read and understand the above section titled "Proper Use of This Service".
- I have read, understand, and agree to abide by the General Instructions in the Consent Based SSN Verifications Users Guide.
- I am verifying SSNs solely for the purpose(s) specified on the individual consent forms associated with the verification requests.

CBSV Attestation Page

(Bottom Half)

- I am currently employed by the company signing the User Agreement and am authorized to conduct business on its behalf.
- I understand that my company must be in physical possession of the signed consent forms prior to requesting verifications of the SSNs.
- I understand that I and/or my company may be subject to penalties if I knowingly and willfully request or obtain any record concerning an individual under false pretenses, including submitting fraudulent information or requesting SSN verifications without obtaining valid consent.

Paperwork Reduction Act Statement

This information collection meets the clearance requirements of 44 U.S.C. § 3507, as amended by Section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 2 minutes to read the instructions, gather the facts, and answer the questions. You may send comments on our estimate of the time needed to complete the form to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address, not the completed form.

Privacy Act Notice

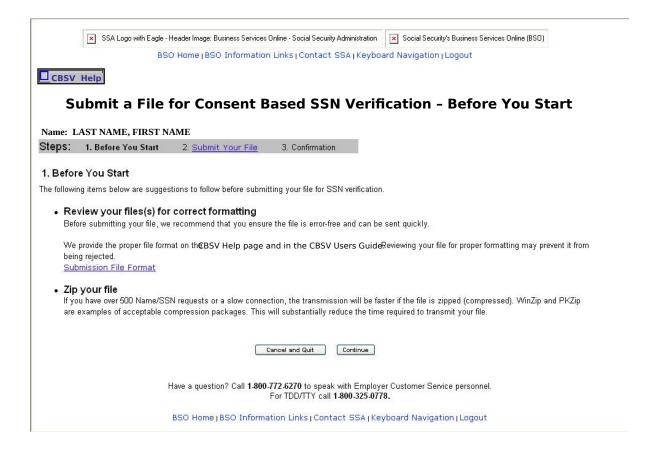
The Social Security Administration (SSA) is allowed to collect the information on this form under Sections 205 and 1106 of the Social Security Act and the Privacy Act of 1974 (5 U.S.C. § 552a). We need this information to register your company and your authorized employee(s) to use our system for verifying Social Security Numbers and to contact you, if necessary. Giving us this information is voluntary. However, without the information we will not be able to provide this service to your company. SSA may also use the information we collect on this form for such purposes authorized by law, including to ensure the appropriate use of the service.

By selecting the "I Accept" button, you certify that you have read, understand and agree to the user certification of Business Services Online.

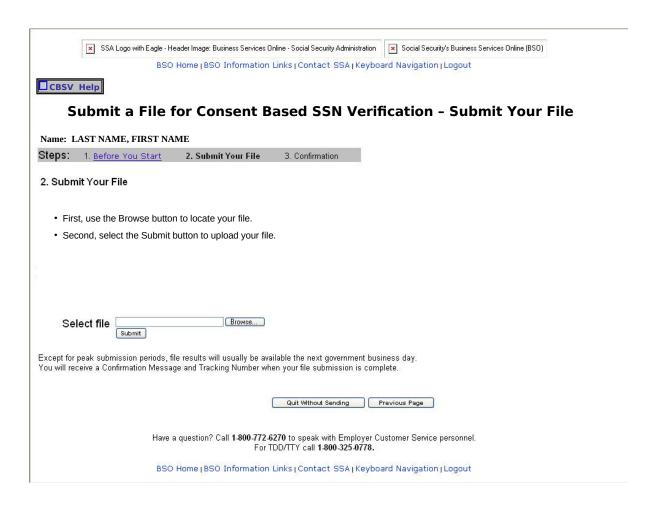
I Accept

I DO NOT Accept

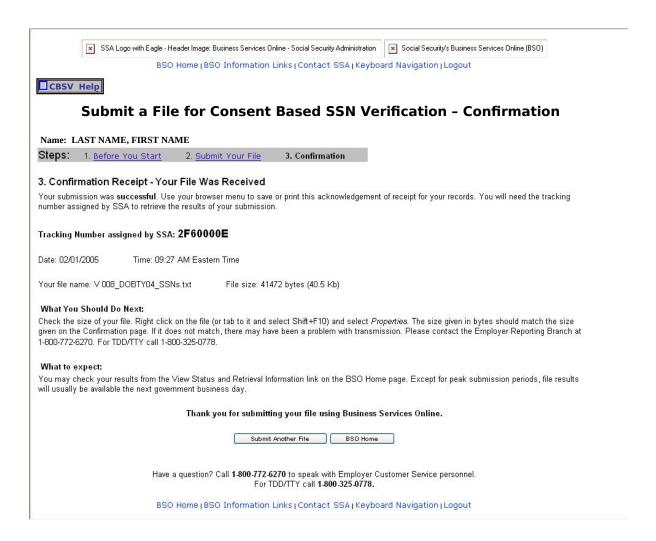
Submit A File – Before You Start



File Submittal



Submission Confirmation



Status and Results Retrieval

a for Consent	Rased SSN Verific	ation - Status and Retrieval
c for consent	basea ssit verifie	ation - Status and Retrieval
E, FIRST NAME	COST CONCUSSION ON A PROPERTY CAPTURE TO THE SECOND	
for checking the status of the	files	
ior checking the states of the	, meg.,	
j Number: Use your 8 cha	racter tracking number for a specific fil	e status.
		es.
nissions: Retrieve a list of	file submissions available to your PIN.	
Option 1	Tracking Number	Submit 1
Ontion 2	Range Start Date	Submit 2
Option 2	Range End Date	Submit 2
	All Submissions	Submit 3
	for checking the status of the J Number: Use your 8 cha nge: View status of your file nissions: Retrieve a list of	for checking the status of the files: g Number: Use your 8 character tracking number for a specific filenge: View status of your file by entering a range of submission dathissions: Retrieve a list of file submissions available to your PIN. Option 1 Tracking Number Range Start Date MMDDYYYY Range End Date

Submittal Status

SSA Logo with Eagle - Header Image: Business Services Online - Social Security Administration

Social Security's Business Services Online (BSO)

BSO Home | BSO Information Links | Contact SSA | Keyboard Navigation | Logout

CBSV Help

Status and Retrieval Results

Submission Date	Tracking Number	SSNs Submitted	Needs Review	Status Code	Retrieval Option(s)		Available Through	
03/15/2005	XXX00002	1578	-	INPROC	-	-	<u></u>	
03/01/2005	XXX00004	8	2	AVLBLE	DWNLD		03/31/2005	
03/01/2005	XXX0000C	10	6	AVLBLE	DWNLD		03/31/2005	
03/01/2005	XXX00001	126	0	VIEWED	-		03/31/2005	
03/01/2005	XXX00002	1	-	FFRMSE	1 2 77.	127/2	25/2	
03/01/2005	XXX000X2	20	15	DWNLOD	DWNLD		03/31/2005	

New Status Request

Have a question? Call 1-800-772-6270 to speak with Employer Customer Service personnel. For TDD/TTY call 1-800-325-0778.

BSO Home | BSO Information Links | Contact SSA | Keyboard Navigation | Logout

BSO Home | BSO Information Links | Contact SSA | Keyboard Commands | Logout

SSNVS Help

SSN Verification

Name: JOHN BENT Submitter EIN: 010217809

Please Note:

- All verified, unverified, and deceased records will be returned.

 Mandatory fields are indicated by an *.

 Field specific help is available by selecting the underlined links below.

 In the event SSNV2 may not be able to process your request, you will be given two (2) options:

 Overnight Processing saves the data you entered to a file for overnight processing, and displays a confirmation number on the Confirmation page that you will need to check the status of your request and view the results.

 Home Page cancels the request, and any data entered on the SSN Verification form is not saved.

Please enter the following information for each employee you would like to verify.

* <u>SSN</u> (9 9 9 9 9 9 9 9)	* <u>First Name</u>	Middle Name	*Last Name	Suffix	Date of Birth (MMDDYYYY)	Gender (F/M)
1.						-
3.				-		
4.						
5.						
6.						
7.		<u> </u>				
8.						
9.						
10.						

You may want to print or save this page BEFORE you submit, as this information will NOT be visible after submission. This page contains confidential information. Please keep the printed / saved page in a secure place.



Have a question? Call 1.800-772.6270 to speak with Employer Customer Service personnel. For TDD/TTY call 1.800-325-0778.

BSO Home | BSO Information Links | Contact SSA | Keyboard Commands | Logout