

## **IRES Revisions for the Employer Suite of Services Screen Changes**

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**LEGEND:**

***Please note that existing action buttons on the “As Is” and “To Be” screens may not be shown or shown in the correct position on the screen due to the “cut and paste” method of developing this package.***

The screens with yellow highlights show the “To Be” screens.

The screens with the green highlights and strikethroughs are the “As Is” screens,

Layout changes such as the reordering/moving of paragraphs/sentences were not highlighted.

**Revision History**

Date	Version	Location of Change	Summary of Changes
08/12/2010	1.1	Pages 3, 20	Wording changes
8/12/2010	1.1	Page 2	Addition of “Please note...” and Revision History.



## Request Access to BSO Services

### Select Service Suites

You must request access to do specific functions within a service suite. Let us help you choose which functions to add.



#### **SSA Services Suite for Employers:**

##### **Electronic Wage Reporting Service and/or Social Security Number Verification Service (SSNVS)**

Electronic Wage Reporting allows employers to Report Wages to Social Security and to view the status of their submissions.

Social Security Number Verification Service (SSNVS) allows the completion of an online form or submission of a file to request verification of names and Social Security Numbers of employees free of charge to employers and their agents for wage reporting purposes only. To verify SSNs for other than wage reporting purposes, please select the Special Services Suite for Consent Based Social Security Number Verification Service (CBSV) below.



#### **SSA Services Suite for Attorneys:**

##### **Form SSA-1694 Business Taxpayer Information**

Allows attorneys or authorized representatives to register with Social Security for Form SSA-1694 Request for Business Entity Taxpayer Information and perform the following functions:

- Complete Form SSA-1694 Business Taxpayer Information Form
- Update Form SSA-1694 Business Taxpayer Information Form



#### **Internet Representative Payee Suite:**

Allows individual and organizational representatives to file their Representative Payee Report electronically. This includes Form SSA-623 for individual Representative Payees, SSA-6230 for

parents, stepparents and grandparents with minor children in custody, and SSA-6234 for Representative Payee organizations.

Allows submission and printing of the appropriate representative payee accounting forms and allows downloading submitted forms for up to 30 days after submission.

## Special Services Suite:



### **CBSV: Consent Based Social Security Number Verification Service**

CBSV, a consent and fee-based, third party verification service should not be confused with SSNVS service displayed above in the SSA Services Suite for Employers.

In order to complete your registration we must collect your Employer Information. Please check the CBSV box to the left then select the "Next" button below to record your Employer's EIN and Business or Organization name. Note: You will be denied access to CBSV if this information is not provided.



## Request Access to BSO Services

### Select Service Suites

You must request access to do specific functions within a service suite. Let us help you choose which functions to add.



#### SSA Services Suite for Employers:

##### Electronic Wage Reporting Service and/or Social Security Number Verification Service (SSNVS)

Electronic Wage Reporting allows ~~use of one or more of the following services:~~

- Reporting Wages to Social Security
- ~~View File/Wage Reports Status, Errors, and Error Notices **without** Name / SSN Errors~~
- ~~View File/Wage Reports Status, Errors, and Error Notices **with** Name / SSN Errors~~

##### Social Security Number Verification Service (SSNVS)

Allows the completion of an online form or submission of a file to request verification of names and Social Security Numbers of employees free of charge to employers and their agents for wage reporting purposes only. To verify SSNs for other than wage reporting purposes, please select the Special Services Suite for Consent Based Social Security Number Verification Service (CBSV) below.



#### SSA Services Suite for Attorneys:

##### Form SSA-1694 Business Taxpayer Information

Allows attorneys or authorized representatives to register with Social Security for Form SSA-1694 Request for Business Entity Taxpayer Information and perform the following functions:

- Complete Form SSA-1694 Business Taxpayer Information Form
- Update Form SSA-1694 Business Taxpayer Information Form



#### Internet Representative Payee Suite:

Allows individual and organizational representatives to file their Representative Payee Report electronically. This includes Form SSA-623 for individual Representative Payees, SSA-6230 for parents, stepparents and grandparents with minor children in custody, and SSA-6234 for Representative Payee organizations.

Allows submission and printing of the appropriate representative payee accounting forms and allows downloading submitted forms for up to 30 days after submission

**Special Services Suite:**

**CBSV: Consent Based Social Security Number Verification Service**

In order to complete your registration we must collect your Employer Information. Please check the CBSV box to the left then select the "Next" button below to record your Employer's EIN and Business or Organization name. Note: You will be denied access to CBSV if this information is not provided.

Cancel

Next



## Add Employer Information

You must have an Employer Identification Number (EIN) to request access to some of the BSO Services. If you are self-employed, you may request limited access without an EIN. [Apply For EIN](#)

NOTE: Accountants, CPAs, etc. You only need to register once in your own firm's name. You can then conduct business for as many clients as you wish.

Information about you, or your business or organization: We will compare this information with our records to verify you are currently employed by the business or organization you represent. Correspondence to your employer will be sent to the address we have on file. Select [this link](#) for more help with completing this form.

- I have an SSN and I am an employee of a business or organization that has an EIN
  - I do NOT have an SSN and I work outside the U.S. for a business or organization that has an EIN
  - I am Self-Employed with an EIN and receive a W-2 under this EIN
  - I am Self-Employed with an EIN and do NOT receive a W-2 under this EIN
  - I am Self-Employed and my earnings are reported on IRS Schedule SE (Self-Employment Earnings)
  - I am a Household Employer and have an EIN
  - I am a Volunteer for an organization that has an EIN
- Employer Identification Number (EIN):**

112222222

**Look-up Name (button)**

(If you do NOT have an EIN then leave this field blank.)

**Business or Organization Name:**

DEMO EMPLOYER INC

You may edit the name here, but it does not change the name on Internal Revenue Service (IRS) records.

Submit Employer Information







## Add Employer Information

You must have an Employer Identification Number (EIN) to request access to some of the BSO Services. If you are self-employed, you may request limited access without an EIN. [Apply For EIN](#)

NOTE: Accountants, CPAs, etc. You only need to register once in your own firm`s name. You can then conduct business for as many clients as you wish.

Information about you, or your business or organization: We will compare this information with our records to verify you are currently employed by the business or organization you represent. Correspondence to your employer will be sent to the address we have on file. Select [this link](#) for more help with completing this form.

- I have an SSN and I am an employee of a business or organization that has an EIN
- I do NOT have an SSN and I work outside the U.S. for a business or organization that has an EIN
- I am Self-Employed with an EIN and receive a W-2 under this EIN
- I am Self-Employed with an EIN and do NOT receive a W-2 under this EIN
- I am Self-Employed and my earnings are reported on IRS Schedule SE (Self-Employment Earnings)
- I am a Household Employer and have an EIN
- I am a Volunteer for an organization that has an EIN

**Employer Identification Number (EIN):**

112222222

(If you do NOT have an EIN then leave this field blank.)

**Business or Organization Name:**

DEMO EMPLOYER INC

~~Please check the following statement **ONLY** if applicable.~~



~~I am a third party submitter registering to do business on behalf of another business or organization.~~

Last Update 08/12/2010

[Submit Employer Information](#)

## Report Wages Service Request :

This screen replaces 2 separate screens – one for report wages (basic) and View File / Wage Report Status, Errors and Error Notices (included in Superseded Screen section).



## Request Access to BSO Services

Page 2 of 6

### Report Wages to Social Security

Requesting access for the Report Wages to Social Security function will allow you to:

- Create, print, and submit Forms W-2 and W-2c Online,
- Upload wage submission or resubmission files that are prepared in the Electronic Filing (EFW2/EFW2C) format,
- Acknowledge resubmission request notices and obtain time extensions for resubmission requests, and
- View **Wage Report** status.

#### Do you want to report wages to Social Security?

Yes  No

#### In addition, do you want to View Wage Report Name/SSN Errors?

Yes  No

< Previous

Next



## Request Access to BSO Services

### Report Wages to Social Security

#### Do you want to report wages to Social Security?

Requesting access for the Report Wages to Social Security function will allow you to :

- Create, print, and submit Forms W-2 and W-2c Online,
- Upload wage submission or resubmission files that are prepared in the Electronic Filing (EFW2/EFW2C) format,
- Acknowledge resubmission request notices and obtain time extensions for submission requests, and
- View **basic submission** status.



Yes



No

< Previous

Next



## Request Access to BSO Services

### Request Summary

You have selected the following functions:

Report Wages to Social Security

Form SSA-1694 Request for Business Entity Taxpayer Information

Internet Representative Payee

Select the "Confirm" button below to send your access request to the Social Security Administration. If you wish to make changes, use the "<< Previous" button to return to the appropriate page.

<< Previous

Confirm

## Request Access to BSO Services Confirmation:

### Happy Path

The user receives this confirmation if the employer address is OK and MEF was passed (MEF check performed because Form 1694 (ATF) and IRPA employee were selected).



## Request Access to BSO Services Confirmation

Your request for access to the services and tasks listed below was received on July 07, 2010.

### Report Wages to Social Security

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Report Wages to Social Security."

### View Wage Report Name / SSN Errors

An activation code has been sent by first class mail to the address we have on record for your employer (BALT, MD). Once you have received the activation code and activated this service, you may view Wage Report Name/ SSN Errors from the Wage Reporting menu.

### Social Security Number Verification Service

An activation code has been sent by first class mail to the address we have on record for your employer (BALT, MD). Once you have received the activation code and activated this service, you may access "Social Security Number Verification Service" from the BSO Main Menu page.

### Form SSA-1694 Request for Business Entity Taxpayer Information

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Form SSA-1694 Request for Business Entity Taxpayer Information."

### Internet Representative Payee

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Internet Representative Payee."

Please print this page for your records.

PRINT

Main Menu



## Request Access to BSO Services Confirmation

Your request for access to the services and tasks listed below was received on July 27, 2010.

Please print this for your records.

### Report Wages to Social Security

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Report Wages to Social Security."

### Form SSA-1694 Request for Business Entity Taxpayer Information

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Form SSA-1694 Request for Business Entity Taxpayer Information."

### View Name and Social Security Number Errors with Name / SSN Errors

Your activation code has been sent by first class mail to the address we have on record for your employer (BAHAMAS, .). Once you have received the code and activated this service, you may access "View Name and Social Security Number Errors with Name / SSN Errors" from the BSO Main Menu page (see activation information at left of this screen).

### Social Security Number Verification Service

Your activation code has been sent by first class mail to the address we have on record for your employer (BAHAMAS, .). Once you have received the code and activated this service, you may access "Social Security Number Verification Service" from the BSO Main Menu page (see activation information at left of this screen).

### Internet Representative Payee

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Internet Representative Payee."

## Employer Address Not Available

The user receives this confirmation if the employer address is not found.



## Request Access to BSO Services Confirmation

---

Your request for access to the services and tasks listed below was received on [date].



**The service(s) listed below is (are) currently pending because your employer's address cannot be found in SSA records.**

Report Wages to Social Security

View Wage Report Name / SSN Errors

Social Security Number Verification Service

Form SSA-1694 Request for Business Entity Taxpayer Information

Internet Representative Payee

**To confirm your employer's address, please send a fax to (570) 706-7874 and provide the following information:**

A letter on your company's letter head providing the following:

- A copy of IRS Form SS-4 (or)
- A copy of IRS Form 941 (or)
- IRS EIN Notification Letter and a letter on your company letter head including the following:
  - Your Company Name
  - Your Company Address
  - Your Company Telephone Number
  - Your Name
  - Your Social Security Number
  - Your Signature
  - Your Printed Name
  - Your Title



You will be informed by email, phone, or fax what to do next. You should hear from us within two business days after sending your fax. Please note that from January through April, the peak wage-reporting season, it may take a few business days longer.

PRINT

Main Menu

Please print this page for your records.

## Employer Information Not Available

The user receives this confirmation if the employer address is found but the MEF Check failed for Form 1694 (ATF) and IRPA employee.



## Request Access to BSO Services Confirmation

Your request for access to the services and tasks listed below was received on July 07, 2010.

### Report Wages to Social Security

You may begin to use this service immediately. To do that, select "BSO Main Menu" below. Then, on the BSO Main Menu page, select "Report Wages to Social Security."

### View Wage Report Name / SSN Errors

An activation code has been sent by first class mail to the address we have on record for your employer (BALT, MD). Once you have received the activation code and activated this service, you may view Wage Report Name/ SSN Errors from the Wage Reporting menu.

### Social Security Number Verification Service

An activation code has been sent by first class mail to the address we have on record for your employer (BALT, MD). Once you have received the activation code and activated this service, you may view "Social Security Number Verification Service" from the BSO Main Menu page.



The service(s) listed below is (are) currently pending because SSA records do not indicate that you work for the employer you have selected.

## Form SSA-1694 Request for Business Entity Taxpayer Information

### Internet Representative Payee

We are unable to complete your request for services at this time because the information you provided does not match the information SSA has on file for the Employer Identification Number. If you were hired in the last 18 months by the employer you submitted information for, it is possible that SSA's records do not yet reflect your employment with the business or organization for which you are trying to request services.

Please send a fax to (570) 706-7874 and provide the following information:

A letter on your company's letter head providing the following:

- Your Company Name
- Your Company Address
- Your Company Telephone Number
- Your Company EIN
- Your Name
- Your User ID (used to log in to these services)
- Your Social Security Number (SSN)
- Your Date of Birth
- Authorizing Official's Name
- Authorizing Official's Title
- Authorizing Official's Date of Birth
- Authorizing Official's Social Security Number
- Statement certifying that you work for the employer and are authorized to conduct business on behalf of the employer

You will be informed by email, phone, or fax what to do next. You should hear from us within two business days after sending your fax. Please note that from January through April, the peak wage-reporting season, it may take a few business days longer.

Please print this page for your records

PRINT

Main Menu



## Main Menu

Welcome, JOHN PUBLIC

Your password expires on **January 17, 2010**

### [Report Wages To Social Security](#)

Submit, download or process W-2s and W-2cs

View submission status, acknowledge resubmission notices or

Request resubmission extensions

**[View errors and error notices for wage files and/or wage reports submitted by or for your company](#)**

### [Social Security Number Verification Service](#)

Request online SSN verification, or

Submit files for SSN verification

### [Form SSA-1694 Request for Business Entity Taxpayer Information](#)

Submit or update a Business Taxpayer Information form to receive form 1099 for work related to claimant representation

### [Internet Representative Payee Accounting \(IRPA\)](#)

File a Form SSA-623, SSA-6230, or SSA-6234 Representative Payee Reports electronically

Submit and print representative payee accounting forms,

Download submitted forms for up to 30 days after submission



## Main Menu

Welcome, JOHN PUBLIC

Your password expires on **January 17, 2010**

### [Report Wages To Social Security](#)

Submit, download or process W-2s and W-2cs  
View submission status, acknowledge resubmission notices or  
Request resubmission extensions

### [Social Security Number Verification Service](#)

Request online SSN verification, or  
Submit files for SSN verification

### [Form SSA-1694 Request for Business Entity Taxpayer Information](#)

Submit or update a Business Taxpayer Information form to receive form 1099 for work related to claimant representation

### [Internet Representative Payee Accounting \(IRPA\)](#)

File a Form SSA-623, SSA-6230, or SSA-6234 Representative Payee Reports electronically  
Submit and print representative payee accounting forms,  
Download submitted forms for up to 30 days after submission

## View Pending Services

### Re-Request Activation Codes

**Services Pending due to Inactivated Services only.**



### Re-Request Activation Codes

You have not entered the activation code(s) for the requested services listed below. If you have not received the activation code(s) or if you have misplaced the code(s), you may have the activation code mailed to you again by selecting the service(s) below. You may only request activation codes every 10 days. Each activation code will expire 60 days after the date you initially selected the service. If the activation code expires, select "[Request Access to BSO Services](#)" to re-select the service.



**View Wage Report Name/SSN Errors**

View Wage Report Name/SSN Errors will display these errors for the wage information submitted by you or for your employer.



Social Security Number Verification Service

Social Security Number Verification Service (SSNVS) allows the completion of an online form or submission of a file to request verification of names and Social Security Numbers of employees free of charge to employers and their agents for wage reporting purposes only.

Access to this service involves a more rigorous process and requires pre-authorization from your employer. If it has been 2 weeks since you requested this access and you have not yet received your activation code from your employer, please check with your employer first before re-requesting another activation code





## Re-Request Activation Codes

You have previously requested access to the services below. If you have not received, or have misplaced your activation code(s), you may re-request them here. If it has not been at least 10 days since you requested the access, you will not be able to re-request your activation code(s) at this time. If it has been more than 60 days since you requested access, you will need to re-request access via the [Request Access to BSO Services](#) option.

 

View [File](#) Wage Report [Status, Errors, and Error Notices](#) **without** Name / SSN Errors

- Review the status of wage files and/or wage reports submitted by or for your company.
- Review the errors found by Social Security in wage files submitted by or for your company, and
- Review error notices sent by Social Security about wage files submitted by or for your company.

Re-Request



## View Pending Services:

### Employer Address Not Found



## View Pending Services



**The service(s) listed below is (are) currently pending because your employer's address cannot be found in SSA records.**

Report Wages to Social Security

View Wage Report Name / SSN Errors

Social Security Number Verification Service

Form SSA-1694 Request for Business Entity Taxpayer Information

Internet Representative Payee

**You may have already faxed in the required information. You will be informed by email, phone, or fax what to do next. You should hear from us within two business days after sending your fax. Please note that from January through April, the peak wage-reporting season, it may take a few business days longer.**

**If you have not faxed in the required information, please send a fax to (570) 706-7874 and provide the following information:**

A letter on your company's letter head providing the following:

- A copy of IRS Form SS-4 (or)
- A copy of IRS Form 941 (or)
- IRS EIN Notification Letter and a letter on your company letter head including the following:
  - Your Company Name
  - Your Company Address
  - Your Company Telephone Number
  - Your Name
  - Your Social Security Number
  - Your Date of Birth
  - Your User ID (used to log in to BSO)
  - Your Signature

- Your Printed Name
- Your Title
- Authorizing Official's Name
- Authorizing Official's Title
- Authorizing Official's Date of Birth
- Authorizing Official's Social Security Number
- Statement certifying that you work for the employer and are authorized to conduct business on behalf of the employer

## View Pending Services

### MEF Check Fails

**The user receives this confirmation if the employer address is found but the MEF Check failed for Form 1694 (ATF) and/or IRPA employee.**



## View Pending Services



- **The service(s) listed below is (are) currently pending because SSA records do not indicate that you work for the employer you have selected.**
- 

Form SSA-1694 Request for Business Entity Taxpayer Information

Internet Representative Payee

**You may have already faxed in the required information. You will be informed by email, phone, or fax what to do next. You should hear from us within two business days after sending your fax. Please note that from January through April, the peak wage-reporting season, it may take a few business days longer.**

**If you have not faxed in the required information, please send a fax to (570) 706-7874 and provide the following information:**

A letter on your company's letter head providing the following:

- Your Company Name
- Your Company Address
- Your Company Telephone Number
- Your Company EIN
- Your Name
- Your User ID (used to log in to these services)
- Your Social Security Number (SSN)
- Your Date of Birth
- Authorizing Official's Name
- Authorizing Official's Title
- Authorizing Official's Date of Birth
- Authorizing Official's Social Security Number

- Statement certifying that you work for the employer and are authorized to conduct business on behalf of the employer



## Remove Access to BSO Services

To remove access to BSO Services please select the service(s) that you would like to remove.

Report Wages to Social Security

- Create, print, and submit Forms W-2 and W-2c Online,
- Upload wage submission or resubmission files that are prepared in the Electronic Filing (EFW2/EFW2C) format,
- Acknowledge resubmission request notices and obtain time extensions for resubmission requests, and
- [View Wage Report Name / SSN Errors](#)

**If access to Report Wages to Social Security is removed, View Wage Report Name / SSN Errors will also be removed.**

[View Wage Reports Name / SSN Errors](#)

**View the submission status, errors and error notices for wage files and/or wage reports with Name/SSN Errors submitted by you or on your behalf.**

Social Security Number Verification Service (SSNVS)

- Complete an online form or submit files to request verification of names and Social Security Numbers of employees of the company for which you work or of the company that has hired you to perform this service.

Form SSA-1694 Request for Business Entity Taxpayer Information

Law firms, partnerships, corporations, and multi-member LLCs/ LLPs that have attorneys and /or non-attorney representatives as partners or employees who receive direct payment must provide us with taxpayer identification information for that business entity using the Business Taxpayer Information Form. You will be able to:

- Complete a Business Taxpayer Information Form
- Update a Business Taxpayer Information Form

Internet Representative Payee Accounting Service (IRPA)

- Allows individual and organizational representatives to file their Representative Payee Report electronically. This includes Form SSA-623 for individual Representative Payees, SSA-6230 for parents,

stepparents and grandparents with minor children in custody, and SSA-6234 for Representative Payee organizations.

- Allows submission and printing of the appropriate representative payee accounting forms and allows downloading submitted forms for up to 30 days after submission.

Cancel

Remove



## Remove Access to BSO Services

To remove access to BSO Services please select the service(s) that you would like to remove.

### Form SSA-1694 Request for Business Entity Taxpayer Information

Law firms, partnerships, corporations, and multi-member LLCs/ LLPs that have attorneys and /or non-attorney representatives as partners or employees who receive direct payment must provide us with taxpayer identification information for that business entity using the Business Taxpayer Information Form. You will be able to:

- Complete a Business Taxpayer Information Form
- Update a Business Taxpayer Information Form



#### View File/Wage Report Status, Errors, and Error Notices without Name / SSN Errors

- Review the status of wage files and/or wage reports submitted by or for your company.
- Review the errors found by Social Security in wage files submitted by or for your company, and
- Review error notices sent by Social Security about wage files submitted by or for your company.



#### Internet Representative Payee Accounting Service

- Allows individual and organizational representatives to file their Representative Payee Report electronically. This includes Form SSA-623 for individual Representative Payees, SSA-6230 for parents, stepparents and grandparents with minor children in custody, and SSA-6234 for Representative Payee organizations.
- Allows submission and printing of the appropriate representative payee accounting forms and allows downloading submitted forms for up to 30 days after submission



#### Social Security Number Verification Service (SSNVS)

- Complete an online form or submit files to request verification of names and Social Security Numbers of employees of the company for which you work or of the company that has hired you to perform this service.



#### Report Wages to Social Security

Last Update 08/12/2010

- Create, print, and submit Forms W-2 and W-2c Online,
- Upload wage submission or resubmission files that are prepared in the Electronic Filing (EFW2/EFW2C) format,
- Acknowledge resubmission request notices and obtain time extensions for resubmission requests, and
- ~~View basic submission status.~~

Remove





## Update Your Employer Information

This employer information form is used to gather information about the business you own or by which you are employed. We will compare this information with our records to verify you are currently employed by the business or organization you represent. Correspondence with your employer will be sent to the address we have on file.

To change your EIN you must first "Remove Your Employer Information" using the link in the left panel. That will deactivate all active services with this employer. Then re-request services for the new EIN using the "Request New Services" link in the left panel.

I have an SSN and I am an employee of a business or an organization that has an EIN.

Employer Identification Number (EIN):

**Look-up Name (button)**

Business or Organization Name:

**You may edit the name here, but it does not change the name on Internal Revenue Service (IRS) records.**



## Update Your Employer Information

This employer information form is used to gather information about the business you own or by which you are employed. We will compare this information with our records to verify you are currently employed by the business or organization you represent. Correspondence with your employer will be sent to the address we have on file.

To change your EIN you must first "Remove Your Employer Information" using the link in the left panel. That will deactivate all active services with this employer. Then re-request services for the new EIN using the "Request New Services" link in the left panel.

I have an SSN and I am an employee of a business or an organization that has an EIN.

112222222

Employer Identification Number (EIN):

DEMO EMPLOYER INC

Business or Organization Name:

Please check the following the statement below ONLY if applicable.

I am a third party submitter registering to do business on behalf of another company.

Update

## Result of selecting Suite of Services link at left of BSO Welcome Page



### *BSO Suite of Services*

The following services are available within BSO:

- **Report Wages to Social Security**

Allows you to send W-2s and W-2cs to Social Security either by uploading a specifically formatted electronic file or by directly keying W-2s and W-2cs in an online form. You can view the submission status, errors and error notices for wage files and/or wage reports submitted by you or on your behalf. Notices to resubmit a wage file can be acknowledged online. In addition, a one-time 15-day extension of the deadline for resubmitting wage data can be requested.

- **View Wage Report Name / SSN Errors**

Allows you to view the submission status, errors and error notices for wage files and/or wage reports with Name/SSN Errors submitted by you or on your behalf.

- **Social Security Number Verification Service**

Allows you to complete an online form or submit specifically formatted files to request verification of names and Social Security Numbers of employees of the company for which you work or the company that has hired you to perform this service.

#### ***Proper Uses of Social Security Number Verification Service***

- Social Security will verify Social Security Numbers (SSNs) solely to ensure that the records of current or former employees are correct for the purpose of completing Internal Revenue Service Form W-2 (Wage and Tax Statement).
- Do not use the service to verify SSNs of potential new hires or contractors.
- Company policy concerning the use of SSNVS should be **applied**



**consistently to all workers**; for example:

*(Rest of page is the same as current <http://www.ssa.gov/bsa/services.htm>)*

## BSO Suite of Services

The following services are available within BSO:

- **Report Wages to Social Security**

Allows you to send W-2s and W-2cs to Social Security either by uploading a specifically formatted electronic file or by directly keying W-2s and W-2cs in an online form. Capability to view submission processing status is available. Notices to resubmit a wage file can be acknowledged online. In addition, a one-time 15-day extension of the deadline for resubmitting wage data can be requested.

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- ~~**View File/Wage Report Status, Errors, and Error Notices**~~

~~Allows you to view the processing status, errors and error notices for wage files and/or wage reports submitted by or for your company.~~

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- ~~**View Name and Social Security Number Errors**~~

~~Allows you to view the processing status, errors (including Name and Social Security Number mismatches), and error notices for wage files and/or wage reports submitted by or for your company.~~

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- **Social Security Number Verification Service**

Allows you to complete an online form or submit specifically formatted files to request verification of names and Social Security Numbers of employees of the company for which you work or the company that has hired you to perform this service.

### ***Proper Uses of Social Security Number Verification Service***

- Social Security will verify Social Security Numbers (SSNs) solely to ensure that the records of current or former employees are correct for the purpose of completing Internal Revenue Service Form W-2 (Wage and Tax Statement).

- Do not use the service to verify SSNs of potential new hires or contractors.
- Company policy concerning the use of SSNVS should be ***applied consistently to all workers***; for example:

**Employer Address Not Available:** Displayed when an Employer is Added/Updated and services have not been selected.



## Request Access to BSO Services

### Employer Address Not Available

We are unable to add/update the employer you entered at this time because your employer's address cannot be found in SSA records.

To confirm your employer's address, please send a fax to (570) 706-7874 and provide the following information:

A letter on your company's letter head providing the following:

- A copy of IRS Form SS-4 (or)
- A copy of IRS Form 941 (or)
- IRS EIN Notification Letter **and** a letter on your company letter head including the following:
  - Your Company Name
  - Your Company Address
  - Your Company Telephone Number
  - Your Name
  - Your Social Security Number
  - Your Signature
  - Your Printed Name
  - Your Title

You should be able to add/update the employer within two business days after sending your fax. Please note that from January through April, the peak wage-reporting season, it may take a few business days longer.

Main Menu





## Request Access to BSO Services

### Employer Address Not Available

We are unable to process your request at this time because your employer's address is currently unavailable.

To confirm your employer's address, please send a fax to (570) 706-7874 and provide the following information:

A letter on your company's letter head providing the following:

- A copy of IRS Form SS-4 (or)
- A copy of IRS Form 941 (or)
- IRS EIN Notification Letter **and** a letter on your company letter head including the following:
  - Your Company Name
  - Your Company Address
  - Your Company Telephone Number
  - Your Name
  - Your Social Security Number
  - Your Signature
  - Your Printed Name
  - Your Title

Under normal circumstances, you should be able to resume requesting access to services within two business days after sending your fax.

[Main Menu](#)

## Change in User Certification: Log In Screen (for BSO and AR)



## Log In to Online Services

### New User?

You must create an account to use this website. Once you do, you will be provided a User ID to log in to our online services.

#### To create new account you will need to:

- Provide personal information
- Provide contact information
- Create your password and security questions

[Create Log In Account](#)

Did you register with SSA by [phone or paper form](#) and need to create a password?

### Existing User?

Please login in below:

User ID:

Password:

[Forgot user ID?](#)

[Forgot your password?](#)

User Certification:



I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files.

I certify that:

- I understand that I may be subject to penalties if I submit fraudulent information.
- I understand that SSA may prevent me from using these services if SSA determines or suspects there has been misuse of the services.
- I am aware that any person who knowingly and willingly makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
- I am authorized to do business under this User ID.

***By checking the box below you certify that you have read, understand and agree to the user certification of Business Services Online.***

I have read & agree to these terms.

Log In



## Log In to Online Services

### New User?

You must create an account to use this website. Once you do, you will be provided a User ID to log in to our online services.

**To create new account you will need to:**

- Provide personal information
- Provide contact information
- Create your password and security questions

[Create Log In Account](#)

Did you register with SSA by [phone or paper form](#) and need to create a password?

### Existing User?

Please login in below:

User ID:

Password:

[Forgot user ID?](#)

[Forgot your password?](#)

User Certification:

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files.

I certify that:

- I understand that I may be subject to penalties if I submit fraudulent information. I agree that I am responsible for all actions taken with my User ID.
- I understand that SSA may prevent me from using these services if SSA determines or suspects there has been misuse of the services.
- I am aware that any person who knowingly and willingly makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
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***By checking the box below you certify that you have read, understand and agree to the user certification of Business Services Online.***

I have read & agree to these terms.

Log In

## User Registration Attestation



## User Registration Attestation

**Please read the following information about registering to use Business Services Online.**

Please select the link below to read about SSA's legal authority for collecting information.

[Paperwork Reduction Act Statement](#)

### Registering for Business Services

To obtain a User ID and password, complete the registration form and select the submit button on the following page. The information you submit will be verified against our records.

Upon successful registration, you will have your User ID and password.

You may update your registration information or change your password at any time.

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files.

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### User Certification for SSA Business Services Online

I certify that:

- I understand that SSA may prevent me from using these services if SSA determines or suspects there has been misuse of these services.
  - I understand that I may be subject to penalties if I submit fraudulent information.
  - I am aware that any person who knowingly and willingly makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
-

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

I Do NOT Accept

I Accept



## User Registration Attestation

**Please read the following information about registering to use Business Services Online.**

Please select the link below to read about SSA's legal authority for collecting information.

[Paperwork Reduction Act Statement](#)

### Registering for Business Services

To obtain a User ID and password, complete the registration form and select the submit button on the following page. The information you submit will be verified against our records.

Upon successful registration, you will have your User ID and password.

You may update your registration information or change your password at any time.

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files.

---

### User Certification for SSA Business Services Online

I certify that:

- I understand that SSA may prevent me from using these services if SSA determines or suspects there has been misuse of these services.
  - ~~I understand that I may be subject to penalties if I submit fraudulent information. I agree that I am responsible for all actions taken with my User ID.~~
  - I am aware that any person who knowingly and willingly makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
- 

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

I Do NOT Accept

I Accept

## Employer Information Attestation



## Employer Information Attestation

**Please read the following information about entering employer information to request access to BSO services.**

### ***Employer Information for Business Services Online.***

To request access to BSO services, complete the employer information form and select the submit button on the following page. The information you submit will be verified against our records.

After successfully entering employer information, you will be able to select individual services based upon the suite(s) of services you selected.

You may update your employer information any time.

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files

### ***User Certification for SSA Business Services Online***

I certify that:

- I am currently employed by the employer associated with my employer information and am authorized to conduct business on behalf of the employer.

OR

I am the employer of an individual or individuals who work(s) for me in my household.

OR

I am a self-employed individual.

OR



I am a volunteer for an organization.

- I understand that SSA may prevent me and/or the company or organization I represent from using these services if SSA determines or suspects there has been misuse of these services.
- I understand that I may be subject to penalties if I submit fraudulent information.

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



## **Employer Information Attestation**

**Please read the following information about entering employer information to request access to BSO services.**

### ***Employer Information for Business Services Online.***

To request access to BSO services, complete the employer information form and select the submit button on the following page. The information you submit will be verified against our records.

After successfully entering employer information, you will be able to select individual services based upon the suite(s) of services you selected.

You may update your employer information any time.

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files

### ***User Certification for SSA Business Services Online***

I certify that:

- I am currently employed by the employer associated with my employer information and am authorized to conduct business on behalf of the employer.

OR

I am the employer of an individual or individuals who work(s) for me in my household.

OR

I am a self-employed individual.

OR

I am a volunteer for an organization.

- I understand that SSA may prevent me and/or the company or organization I represent from using these services if SSA determines or suspects there has been misuse of these services.

- I understand that I may be subject to penalties if I submit fraudulent information. I agree that I am responsible for all actions taken with my User ID.

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

## Create a Log In Account: Step 3: Review and Submit



### Create a Login Account

#### Step 3: Review & Submit

Please verify that the information you provided is correct.

#### Personal & Contact Information

---

Name: **JOHN PUBLIC**

Date of Birth: **01/02/1920**

SSN: **999-01-1234**

Country: **United States**

Home Street Address: **TEST STREET**

City, State, Zip: **TEST CITY , AK 21345**

Daytime Phone Number: **(123) 123-1234 ext. 3456**

Fax Number:

Email: **user@demoemployer.com**

#### Security Questions and Answers

---

Question 1: **WHAT IS THE NAME OF YOUR FIRST NEPHEW?**

Answer 1: **ANSWER1**

Question 2: **WHAT IS THE MIDDLE NAME OF YOUR MOTHER?**

Answer 2: **ANSWER2**

Question 3: **IF YOU COULD PLAY ANY INSTRUMENT WHAT WOULD IT BE?**

Answer 3: **ANSWER3**

Question 4: **WHAT IS THE YEAR YOU GRADUATED HIGH SCHOOL?**

Answer 4: **ANSWER4**

Question 5: **WHAT IS THE NAME OF YOUR FIRST PET?**

Answer 5: **ANSWER5**

## User Certification for Online Services

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files.

### I certify that:

- I understand that I may be subject to penalties if I submit fraudulent information. I understand that SSA may prevent me from using these services if SSA determines or suspects there has been misuse of the services.
- I am aware that any person who knowingly and willingly makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
- I am authorized to do business under this User ID.

**By checking the box below you certify that you have read, understand and agree to the user certification of Business Services Online.**



I Accept



## Create a Login Account

### Step 3: Review & Submit

Please verify that the information you provided is correct.

#### Personal & Contact Information

---

Name: **JOHN PUBLIC**

Date of Birth: **01/02/1920**

SSN: **999-01-1234**

Country: **United States**

Home Street Address: **TEST STREET**

City, State, Zip: **TEST CITY , AK 21345**

Daytime Phone Number: **(123) 123-1234 ext. 3456**

Fax Number:

Email: **user@demoemployer.com**

#### Security Questions and Answers

---

Question 1: **WHAT IS THE NAME OF YOUR FIRST NEPHEW?**

Answer 1: **ANSWER1**

Question 2: **WHAT IS THE MIDDLE NAME OF YOUR MOTHER?**

Answer 2: **ANSWER2**

Question 3: **IF YOU COULD PLAY ANY INSTRUMENT WHAT WOULD IT BE?**

Answer 3: **ANSWER3**

Question 4: **WHAT IS THE YEAR YOU GRADUATED HIGH SCHOOL?**

Answer 4: **ANSWER4**

Question 5: **WHAT IS THE NAME OF YOUR FIRST PET?**

Answer 5: **ANSWER5**

### User Certification for Online Services

I understand that the Social Security Administration (SSA) will validate the information I provide against the information in SSA's files.

#### I certify that:

- I understand that I may be subject to penalties if I submit fraudulent information. I agree that I am responsible for all actions taken with my User ID.
- I understand that SSA may prevent me from using these services if SSA determines or suspects there has been misuse of the services.
- I am aware that any person who knowingly and willingly makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
- I am authorized to do business under this User ID.

**By checking the box below you certify that you have read, understand and agree to the user certification of Business Services Online.**

I Accept

## Superseded Screen

### **Request Access to BSO Services: View File / Wage Report Status, Errors and Error Notices**



### **Request Access to BSO Services**

Page 3 of 6

View File / Wage Report Status, Errors and Error Notices

View File/Wage Report Status service allows you to view additional submission status of wage information submitted by or for your employer. This additional service also allows you to review any errors the Social Security Administration found in the submitted information, and any error notices the Social Security sent to your employer.

You can choose to view the errors and error notices **with** or **without** Name/SSN errors. Access requires obtaining an activation code, which may take up to 2 weeks.

- The activation notice for reviewing wage information status **without** Name/SSN errors is sent directly to you.
- The activation notice for reviewing wage information status **with** Name/SSN errors is sent directly to your employer. This access involves a more rigorous process and requires pre-authorization from your employer.

After you receive the activation notice, you may activate this additional service by logging in to the BSO web site and from the "Account Maintenance" menu, select "Activate Access to BSO Services" and enter the activation code.

I do NOT want the additional Submission Information described above. Basic Submission Status is included with "Report Wages to Social Security"

I do want the additional Submission Information described above. I request access to View Wage Report **without** Name/SSN Errors.



Last Update 08/12/2010



I do want the additional Submission Information described above. I request access to View Wage Report **with** Name/SSN Errors