APPOINTED REPRESENTATIVE REGISTRATION via INTRANET

CSA Home – user search

Integrated Registration S	ervices Customer Support Application	
A second		
 CSA Home Block 		Help CS001
Unblock	Enter any one of the items below to search for an employer or user.	
Employer Address Search	Search for Employer	
	EIN : Employer Search	
	Search for User	
	SSN: SSN Search	
	or User ID: User ID Search	
	or Rep ID: Rep ID Search	
	Add Foreign User	
	User lives and works outside U.S. and does not have an SSN Add	

Multiple users found

Name: JOHN PUBLIC	SSN: 999011234 IRESCSA	User ID: 9K		01/01/1979	Help CS0
Multiple User IDs	Multiple Use	er IDs Fou	und		
Block	Select a User ID	to view related	information or add a r	iew User ID.	
Unblock	Llass ID	▲ <u>Affiliat</u>	te¢ Affiliate ID <	Service (s)	
User History	<u>User ID</u> 2284P5NZ	EIN	303422950	[BSO] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	
osci mistory				[BSO] SSNVS (Active)	
				[BSO] WAGE REPORTING (Active)	
	22CHQY85	EIN	040560041	[BSO] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	
				[BSO] SSNVS (Active)	
				[BSO] WAGE REPORTING (Active)	
	232YQ644	EIN	040290141	[BSO] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	
				[BSO] SSNVS (Active)	
				[BSO] WAGE REPORTING (Active)	
	23D4279F	EIN	530090862	[BSO] WAGE REPORTING (Active)	
	24D728FH	EIN	020060041	[BSO] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	
				[BSO] SSNVS (Active)	
				[BSO] WAGE REPORTING (Active)	
	24F26GFF	EIN	349980000	[BSO] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	
				[BSO] SSNVS (Active)	
				[BSO] WAGE REPORTING (Active)	
				[BSO] SSNVS (Deactivated)	
	24Q695Y5	EIN	359990000	[BSO] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	
				[BSO] SSNVS (Active)	
				[BSO] WAGE REPORTING (Active)	
	257CDDD6	EIN	218980141	[BS0] VIEW WAGE REPORT NAME/SSN ERRORS (Active)	

One user found or selecting a user id link above

Integrated Registration Se	ervices Customer Support A	Application
Name: JOHN PUBLIC		DOB: 01/01/1979 EIN: 020000000
CSA Home	IRESCSA	Help CS003
 User Information 	User Information for JOHN PUE	BLIC
Service Status	User ID Status: ACTIVE User ID Issue Date: 04/02/2009	
Select Suite	Password Issue Date: 04/02/2009 Password Expiration Date: 07/01/2009	
Add/Update Employer Information		
Report of Contact	Confirm / update information below with user :	
User History		* indicates mandatory field.
Block	* First Name:	: JOHN
Unblock		
Exclusive Special Services	Middle Name:	
	* Last Name:	PUBLIC
	Suffix:	
	* Date of Birth:	: 01011979
	* Address Line 1:	: TEST 1
	Address Line 2:	•
	* City:	WOODLAWN
	* State Abbreviation (for US)/Province:	: MD
	* Zip/Postal Code:	: 21234 Zip Extension:
	* Country:	United States (default on registration)
	* Phone:	: 1231231234 Ext
	Fax:	
	*Email:	user@demoemployer.com
	Mail Temporary Password	d Update
	Add New/Pending User ID	7
	Add New/Feliding User ID	J

Add new user - phone registration

Integrated Registration Se	ervices Customer Support A	Application		
SSN: 999011234 CSA Home New User Information	IRESCSA New User Information			Help CS004
New User Information		* indicates mandatory field.		
	* First Name:			
	Middle Name: * Last Name:			
	Suffix: * Date of Birth:			
	*Address Line 1:			
	Address Line 2: * City:			
	* State Abbreviation (for US)/Province: * Zip/Postal Code:	Zip Extension:		
	*Country:	United States (default on registration)	•	
	* Phone: Fax:	Ext:		
	* Email:			
	State Do you understand that the Social Security Adm	ment inistration will validate the information you	Yes No	
	provide against the information in our files? Do you understand that you may be subject to c fraudulent information? Do you understand that you are responsible for		© •	
		an actions taken ading your open by	<u> </u>	
	Add New/Pending User ID			

New user NUMI failed

Integrated Registration Services	Customer Support A	Application	
	099011234 DOB: 01/01/1979		
CSA Home IRESC			Help CS004
New User Information	v User Information		
	Numi Failed		
		to find the manufacture with	
		* indicates mandatory field.	
	* First Name:	JOHN	
	Middle Name:		
	* Last Name:	PUBLIC	
	Suffix:		
	* Date of Birth:	01011979	
	* Address Line 1:	TEST 1	
	Address Line 2:		
	* City:	WOODLAWN	
	* State Abbreviation (for US)/Province:	MD	
	*Zip/Postal Code:	21234 Zip Extension:	
	* Country:	United States (default on registration)	
	* Phone:	1231231234 Ext:	
	Fax:		
	*Email:	user@demoemployer.com	
	State	ement Yes No	
	you understand that the Social Security Adm vide against the information in our files?	ninistration will validate the information you 💿 🔘	
Do	you understand that you may be subject to c idulent information?	sivil or criminal penalties if you submit 💿 💿	
	you understand that you are responsible for	all actions taken using your User ID?	
	Add New/Pending User ID	Force NUMI	

Add employer information

Integrated Registration Se	ervices Customer Supp	port Application	
Name: JOHN PUBLIC	SSN: 000000000 User ID: 9K8278TG	DOB: 01/01/1979	
CSA Home	IRESCSA		Help CS006
User Information	Employer Information		
Add/Update Employer Information			
Add Services			
Report of Contact	Select one of the following. Requestor is	IS:	
	 An employee of a company th 	nat has an EIN.	
	A Household Employer and has	as an EIN.	
	Self-Employed and has an EIN	Ν.	
	Self-Employed and DOES NO)T have an EIN.	
	Working and residing outside	the U.S. and has an EIN, but does not have an SSN.	
	A Volunteer for a Company/Or	rganization that has an EIN.	
	Internet Representative Payee	ə (iRPA) Individual User.	
	Enter the following about the employ	yer.	
		* indicates mandatory field.	
		EIN:	
	* Company/Organization Name or Busines	ss Name:	
	Do you understand that you and/or you there has been misuse of the services? Ves No	ir company may be banned from use of Online Services if the SSA determines or even suspects	
	Next		

Select Suite

In In	Marca Integrated Registration Services Customer Support Application					
A STRATE	Name: JOHN PUBLIC	SSN: 999011234	User ID: 9K8278TG	DOB: 01/01/1979	EIN: 02000000	
CSA Hom	e	IRESCSA				Help CS024
User Info	rmation	Select Suite				
Select Su	ite	Appointed Representation	sentative Suite			
Report of	f Contact	Register individual as a	n Appointed Representative	e. Service requests must	be completed by the individual throught the online Appointed Representative Suite.	
Service S	tatus	Ŭ				
		Ne	xt			

In person proofing - record information

A Integrated Registration Services Customer Support Application						
Name: JOHN PUBLIC		OB: 05/03/1970 EIN: 020000000				
CSA Home User Information	RESCSA Record ID Information		Help CS035			
Record ID Information		* indicates mandatory field.				
	* Type of ID:	U.S. Driver's License				
	* Complete ID #:	MD12345				
	* State:	MD •				
	Continue					

Print activation code for efolder

Integrated Registration Services Customer Support Application					
Name: JOHN PUBLIC	SSN: 999011234	User ID: YK2YXSSX	DOB: 05/03/1970	EIN: 02000000	
CSA Home User Information	RESCSA Print Activat	tion Code for eF	older		Help CS036
Print Activation Code for eFolder		imant's Electronic Fo rint Activation Code	button to print the Acc	dded successfully. cess Claimant's Electronic Folder activation code Activation Code	2.

View activation code for efolder

Name: JOHN PUBLIC SSN: 999011234 User ID: YK2YXSSX DOB: 05/03/1970 EIN: 020000000	
CSA Home IRESCSA View Activation Code for eFolder	Help CS036
User Information View Activation Code for Flohen View Activation Code for Flohen View Activation Code for Flohen	
The Electronic Folder Activation Code is JBP9D2QB.	
Select the Print Activation Code button to print the Access Claimant's Electronic Folder activation code.	
Print Activation Code	

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 3 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 21235-0001.

Privacy Act Statement

Collection and Use of Personal Information

Sections 205(a) and 1106 of the Social Security Act, as amended, authorize us to collect this information to allow you access to our online applications. We will use the information you provide to verify your identity and to register you, your company, or authorized employee(s) to use our Business Services Online (BSO) suite of services. The Privacy Act (5 U.S.C. § 552a(b)) permits us to disclose the information you provide in accordance with approved routine uses. Providing us this information is voluntary. However, failing to provide us with all or part of the information could prevent us from offering you access to our BSO suite of services. Additional information regarding your use our online applications, routine uses of information, programs, and systems are available on our Internet website, <u>www.socialsecurity.gov</u>, or at your local-Social Security office.

SSA will insert the following revised Privacy Act Statement into the form as soon as possible:

Privacy Act Statement Collection and Use of Personal Information

Sections 205 and 1106 of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent us from offering you access to our telephone and online services.

We will use the information you provide us to verify your identity and register you, your company, or authorized employee(s) to use our telephone or online services. We may also share this information for the following purposes, called routine uses:

- 1. To contractors and other Federal agencies, as necessary, to assist us in efficiently administering our programs;
- 2. To Federal, State, and local entities to assist them with administering income maintenance and health maintenance programs, when a Federal statute authorizes them to use the SSN;
- 3. To a congressional office in response to a request from that office made at the request of the subject of the record or a third party acting on the subject's behalf; and
- 4. To appropriate Federal, State, and local agencies, entities, and persons when: (a) We suspect or confirm a compromise of security or confidentiality of information; (b) We determine that as a result of the suspected or confirmed compromise there is a risk of harm to economic or property interests, risk of identity theft or fraud, or harm to the security or integrity of this system or other systems or programs that rely upon the compromised information; and (c) We determine that disclosing the information to such agencies, entities, and persons will assist us in our efforts to respond to the suspected or confirmed compromise and prevent, minimize, or remedy such harm.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notices (SORN) 60-0058, entitled <u>Master Files of Social Security Number (SSN) Holders and SSN</u> <u>Applications</u>, as published in the Federal Register (FR) on December 29, 2010, at 75 FR 82121, and 60-0373, entitled <u>Repository of Electronic Authentication Data Master File</u>, as published in the FR on December 17, 2010, at 75 FR 79065. Additional information, and a full listing of all of our SORNs, is available on our website at <u>www.ssa.gov/privacy</u>.