社會保障基金
FUNDO DE SEGURANÇA SOCIAL

SAMPLE

Application for the Certificate of Beneficiary's Contribution / Certificate of No Contribution for Individuals

Full name : CHAN TAI MAN

Macao SAR Resident ID Card number : 1234567(8) Contact phone number : 6600XXXX

Language : ☐ Chinese ☑ Portuguese

Pickup location :
☐ St. Lazarus Parish Field Office
☐ Macao Government Services Centre
☑ Macao Government Services Centre in Islands

Chan Tai Man

Signature (must match the signature on the ID card)

XX day XX month 2025 year

A4 規格印件 2021 年 10 月
Formato A-4 Out. 2021

I acknowledge receipt of the certificate

Signature (must match the signature on the ID card)

_____ day _____ month _____ year

社會保障基金 格式 FSS/DC-13(I)
FSS - Modelo FSS/DC-13(I)

Receipt for Your Application for the Certificate of Beneficiary's Contribution / Certificate of No Contribution for Individuals

POINTS TO NOTE:

1. To pick up the certificate, the applicant must bring his/her original Macao SAR Resident ID Card and this receipt, and pay stamp duty at the same time.
2. To authorize a representative to pick up the certificate, the applicant is required to complete the *Declaration of Authorizing a Representative to Collect the Certificate* on the back of this receipt. To pick up the certificate, the representative is required to bring the *Declaration of Authorizing a Representative to Collect the Certificate* and present his/her own original identity document.
3. The certificate will be kept for six months from the first day available for collection. The application will be cancelled if no one comes to pick up the certificate by the deadline.

Pickup location:

☐ St. Lazarus Parish Field Office

☐ Macao Government Services Centre

☐ Macao Government Services Centre in Islands

澳門宋玉生廣場 249-263 號中土大廈 18 樓 Alameda Dr. Carlos d'Assumpção, n.os 249-263, China Civil Plaza, 18.º andar, Macau 電話 Tel:2853 2850 傳真 Fax:2853 2840

Declaration of Authorizing a Representative to Collect the Certificate

I hereby declare that I authorize the following person to pick up the certificate on my behalf:

Applicant's information	Representative's information
Full name:	Full name:
Macao SAR Resident ID Card number:	Type of identity document and number:

Signature (must match the signature on the ID card)
_____ day _____ month _____ year