

Declaration for Corrections of Information on Employee Contributions/ Employment Fee for Non-Resident Workers and Refund of Payments

To: Social Security Fund

1. Employer information

Name of employer: _____

Employer Registration Number: _____ Telephone number: _____

2. Contents of declaration

I (full name)_____ hereby make the following declaration:

2.1 ☐ Correct the contribution information of local employees

I hereby submit a correction to the Social Security Fund for contribution information of the persons listed in the table below. The reason(s) is/are: _____

No.	Macao SAR Resident ID Card No.	Name of employee	Information that needs to be corrected		Contribution period that needs to be cancelled (if applicable)	Signature of employee (must match the signature on the ID Card)
			Employment start date	Employment end date		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

2.2 ☐ Correct information about the employment fee for non-resident workers

I hereby submit a correction to the Social Security Fund for information about the employment fee for non-resident workers, for the period from _____ (yy) _____ (mm) to _____ (yy) _____ (mm). The reason(s) is/are: _____

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3. Supporting documents

The following documents are submitted, including: (Please “√” appropriate box(es))

3.1 Correct the contribution information about local employees

- ☐ Photocopy(ies) of the employee’s Financial Services Bureau (abbreviated to DSF in Macao), Salaries Tax – Group I, Registration Form (M/2), a total of _____ document(s)
- ☐ Photocopy(ies) of the employee’s DSF, Salaries Tax, Declaration of Termination of Employment (M/2A), a total of _____ document(s)
- ☐ Confirmation of employee, a total of _____ document(s)
- ☐ A photocopy of the front and back of the employee’s Macao SAR Resident ID Card, a total of _____ document(s)
- ☐ Other supporting documents, please specify: _____

3.2 Correct the information about the employment fee for non-resident workers

- ☐ Supporting documents, please specify: _____

3.3 I am unable to submit relevant supporting documents. The reason(s) is/are:

4. Apply for refund of contributions/employment fee for non-resident workers?

- ☐ No
- ☐ Yes

If the refund is approved, please deposit in the bank account below (required to attach a photocopy of the bank account):

- ☐ MOP bank account of the employer (business name of establishment)
- ☐ Taxpayer’s MOP bank account (required to attach a photocopy of the front and back of the DSF Business Tax Return M/1 or M/8)

Name of bank: _____

Account number: _____

I hereby declare that all the information provided on this declaration is true.

I understand that I will be liable to criminal prosecution if I give a false statement.

Macao, _____ day _____ month _____ year

Signature of employer and
company seal (the name on company
seal must match the name of employer)