

**THE UNITED REPUBLIC OF TANZANIA
PUBLIC SERVICE SOCIAL SECURITY FUND**



GePG USER ACCESS FORM

Part I: Employer Details

Name of Employer:			
Sector (Industry):			
Type of Employer:	Central & Local Government <input type="checkbox"/>	Agency <input type="checkbox"/>	Parastatal <input type="checkbox"/>
	Executive Authority/Ministries <input type="checkbox"/>	Private <input type="checkbox"/>	
TIN Number:	Postal Address:		
Business Registration Number:	Region:		
Telephone Number:	District:		
E-mail:	Street:		

Part II: User Access Details (to be filled by the nominated user)

Full Name:	
Designation:	
Office Telephone Number:	
Mobile Number:	
E-mail:	
Requested Action (Tick appropriate action)	
New User Request <input type="checkbox"/>	Existing User (e.g; change of details) <input type="checkbox"/>
Date:	
Signature:	

Part III: Employer Declaration(To be filled and stamped by Employer /Accounting Officer/Supervisors)

I declare that the above named nominee is an employee in our Institution/Organization and is authorized to access PSSSF GePG Portal for our organization.

Full Name:.....

Designation:.....

Date:.....

Signature:.....

Official Stamp

FOR OFFICIAL USE ONLY

Date Registration Form Received:.....

Responsible Officer's Name:

Date:

Signature:

Official Stamp:

Note: The Fund will not take any responsibility in the circumstances that the employer has failed to inform the Fund timely in case there is a change regarding the above nominated employee/s.