

Republic of the Philippines)
City/Municipality of _____) S.S.
Province of _____)

UNDERTAKING (EMPLOYER WITHOUT POST-DATED CHECKS)

Under Republic Act No. 11199 or the Social Security Act of 2018

Contribution Penalty Condonation and Restructuring Program for Household Employers

(DD Month YYYY)

I, _____, household employer, with Employer
(Name)
ID Number _____ and residential address at _____
(Employer ID Number) (Address)
_____ admit being delinquent in the payment of Social Security

(SS) Contributions, including penalties and interest if any, and undertake to pay the Social Security System (SSS) the total amount of _____ pesos
(Amount in Words)
(Php _____).
(Amount in Figures)

I undertake to pay my delinquencies in cash/manager's check on due dates in accordance with the approved Installment Payment Schedule and comply with all my obligations under Contribution Penalty Condonation and Restructuring Program. Otherwise, I shall be liable for whatever legal actions, reliefs and/or remedies the SSS has against me.

I hereby waive all my rights to confidentiality of my deposit/s in any and all banks/banking institutions/quasi-banks/financial institutions under the provisions of Republic Act No. 1405 (Bank Secrecy Law), Republic Act No. 6426 (Foreign Currency Deposit Act), Republic Act No. 8791 (General Banking Law), and Republic Act No. 10173 (Data Privacy Act). Moreover, I hereby authorize the SSS, through its duly authorized representatives/officers, to examine, inquire, and look into the said deposit and/or secure information of all my deposit accounts to ensure my/our compliance with the provisions of the Republic Act No. 11199 (Social Security Act of 2018) and/or for whatever legal purpose such waiver may serve.

I hereby consent to the collection, use, access, disclosure, and processing of my personal and sensitive information by the Bank and/or SSS to effect the above-stated purposes, in accordance with their policy on data privacy and pursuant to the requirements of the Data Privacy Act.

Signed in _____, Philippines, on _____.

Signature Over Printed Name

SUBSCRIBED AND SWORN TO before me this ____ day of _____, 20__, affiant having shown to me his/her valid government issued identification card/s _____ issued on _____ at _____, Philippines.

Notary Public

Doc. No. : _____
Page No. : _____
Book No. : _____
Series of : _____