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EMPLOYER ONLINE ACCESS APPLICATION

Instructions

- Use this form to appoint or amend the users from your organization who are authorized to upload PDF files and/or pension contribution files to the CSS Pension Plan website (myCSSPEN). Return the completed form to the mailing address, fax number or email address above.
- The CSS Pension Plan will send any new users a personal username by email.

Employer information	
Employer name: Employer #:	
Authorized users	
Person authorized to add or make changes to authorized users: (E.g.: Board President, Plant Manager, General Manager, CEO, etc. This person cannot be the same as the Authorized User.) Name (first and last) and title: Email address: Direct telephone number (including area code):	
User additions/changes authorized by:	
Signature: Date:	
Authorized User:	
☐ Add ☐ Delete ☐ Update	
Name (first and last) and title: Business mailing address: Business email address: Direct telephone number (including area code): Authorization level: Contribution files Non-contribution files	
Authorized User:	
☐ Add ☐ Delete ☐ Update	
Name (first and last) and title: Business mailing address: Business email address:	
Direct telephone number (including area code): Authorization level:	
Authorization level: ☐ Contribution files ☐ Non-contribution files	

To name additional Authorized Users, please complete an additional sheet(s).