

EVS Federal Privacy Act Statement Third-Party Submitters

The information on this page and your signature on the Federal privacy act statement serve as a formal agreement between your company and SSA. The agreement will govern the verification of employee SSNs for those employers who have executed wage reporting contracts with you. Under this agreement, the contracts between your organization and the employers must be available for inspection in the event that SSA should need to audit your records. EVS promotional material must also be available for review.

You can use a fee-based approach when offering EVS to your clients. However, caution should be taken. SSA offers services, like EVS, free of charge. Some companies in the private sector offer those same services for a fee and develop misleading brochures and advertisements. To discourage the use of misleading mailings about Social Security and Medicare, Congress enacted specific prohibitions in Section 312 of the Social Security Independence and Program Improvements Act of 1994 that broadened the existing deterrents. The prohibitions are codified at Title 42 of the U.S. Code, Section 1320b-10. You should ensure that you are aware of these legal provisions and conform to their requirements.

In a snapshot, you should:

- § Be cautious not to suggest to your clients that this service is only available through you;
- § Advise all customers that this service is available at no cost from SSA and that this service is not a unique or exclusive arrangement between SSA and your company; and
- § Be sure not to give any impression when describing your EVS service to your clients that your company has an arrangement that allows direct access to SSA databases, program software, etc.

To register, sign and date the privacy statement and send it along with your registration form to: Social Security Administration, OCO, DES, EVS, 300 N. Greene Street, 5-E-10 North Building, Baltimore, Maryland 21290-0300. Forms may also be faxed to: (410) 966-3366 or (410) 966-9439

EVS Federal Privacy Act Statement Third-Party Submitters

Company Name

EIN: ____-____-____

Street Address

City, State, Zip Code

The _____¹ certifies that it is authorized, under valid contracts with all outside employers of any individual for whom it will request Social Security number (SSN) verification, to handle annual wage reporting responsibilities with the Social Security Administration (SSA). The _____¹ hereby acknowledges that it is authorized, under this agreement, to request SSN verification from SSA only for the purpose of handling annual wage reporting responsibilities for these employers. The _____¹ understands that SSA agrees to verify SSNs solely to help ensure the accuracy of wage reporting.

The _____¹ also understands that information received from records maintained by SSA must be handled in accordance with the Privacy Act of 1974 (5 U.S.C. 552a). Under the terms of this Act, anyone who knowingly and willfully request or obtains from a Federal agency under false pretenses, any record concerning an individual or uses it for a purpose other than that for which it was requested, shall be subject to a criminal penalty (5 U.S.C. 552a(1)(3)). Misuse of a SSN also is a violation of the Social Security Act (42 U.S.C. 408).

Further, EVS information does not imply that you or your client intentionally provided incorrect information about the employee's name or SSN. It is not a basis, in and of itself, for your client to take any adverse action against an employee. EVS should only be used to verify workers currently employed or an entire payroll database. Your client's policy concerning the use of EVS should be applied consistently to all workers, e.g., if used for new hires, verify all new hires; if used to verify a client's database, verify the entire database. Any client/ employer that uses the information SSA provides regarding name/SSN verification as a pretext for taking adverse action against an employee may violate state or federal law and be subject to legal consequences.

Signature _____ Date _____

Name (Printed) _____ Title _____

^{1/} Enter Your Company's Name