



This application should be used for (please place an X in one option below)

- an employed person posted to another Member State for a specified period
- a civil servant posted to another Member State
- a member of the defence forces posted to another Member State

APPLICATION FOR DETERMINATION OF APPLICABLE LEGISLATION UNDER EU REGULATIONS ON COORDINATION OF SOCIAL SECURITY SYSTEMS

ARTICLES 14.1(a), 13.2(d) and 13.2(e) of EU REGULATION 1408/1971

ARTICLES 11.3(b), 11.3(d) and 12.1 of EU REGULATION 883/2004

- Please use this page as a guide to filling in this form.
- Please use **BLACK** ball point pen.
- Please use **BLOCK LETTERS** and place an X in the relevant boxes.
- Please answer **all questions** that apply to you. If a question does not apply to you, please leave the answer area blank.
- You need a Personal Public Service Number (PPS No.) before you apply.

Please complete at least **four** weeks prior to starting date of E101/A1 certificate and send to:

**International Postings
Client Eligibility Services
Department of Social Protection
Cork Road
Waterford**

LoCall: 1890 690 690 (from the Republic of Ireland only)

Telephone: + 353 1 4715898 (from Northern Ireland or overseas)

Email: Special Collections Enquiry Form

Clarifications on some matters may be requested to finalise your application, where possible this will be done by e-mail. Please provide contact e-mail address here:

Note: The rates charged for the use of 1890 (LoCall) numbers may vary among different service providers.

30. Which country is the employee being posted to?

Grid for country name

31. Please state the exact name(s) and address(es) of companies/sites in the country your employee is being posted to:

Companies/sites 1

Companies/sites name:

Grid for company name

Companies/sites address:

Grid for company address

Companies/sites 2

Companies/sites name:

Grid for company name

Companies/sites address:

Grid for company address

32. Describe the type of work the employee will be performing during their posting:

Large text box for work description

33. Does the employee remain under contract of employment with Irish company?

Yes/No checkboxes

34. Is the employee required to sign a local contract of employment with host company?

Yes/No checkboxes

35. Who is responsible for employees remuneration during the period of posting?

Grid for responsible party

36. Where will PRSI be paid? Revenue P35 Special Collections

PRSI payment checkboxes

37. Who has the authority to direct duties of work, discipline or dismiss the employee during the posting?

Grid for authority name

38. Is employee replacing another worker?

Yes/No checkboxes

Please ensure a copy of employees contract of employment is sent with this application

Declaration

I declare that all the information I have given on this form is accurate.

I will tell the Department of any changes that will affect the conditions of this posting.

Signed by or for employer

Signature box

Signature (not block letters)

Position in company or organisation box

Position in company or organisation

Employer's official stamp box

Date: DD MM 20YY

Employer's telephone number:

MOBILE number grid

MOBILE

LANDLINE number grid

LANDLINE

Employer's email address:

Email address grid

Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.

Data Protection and Freedom of Information

We, the Department of Social Protection, will treat all information and personal data you give as confidential. We will only disclose it to other people or bodies according to the law.

Explanations and terms used in this form are intended as a guide only and are not a legal interpretation.