

ORDINANCE 33 of 19 September 2006 on the individual applications for participation in an additional mandatory pension insurance fund

Passed by virtue of Decision No 65-N of 19 September 2006 of the Financial Supervision Commission, promulgated in SG, issue 83 of 13 October 2006

Section I

General provisions

Art. 1. This Ordinance shall regulate the order for the filing of an application for participation in an additional mandatory pension insurance fund and the requirements to its form and content.

Art. 2. Upon or in relation to the choice of an additional mandatory pension insurance fund under the terms and order provided for in this Ordinance the pension insurance companies, their shareholders or the insurance intermediaries may not provide, offer or promise in any form special privileges, gifts, services or other benefits to the persons subject to social security.

Section II

Order for filing an application for participation in an additional mandatory pension insurance fund and requirements to its form and content.

Art. 3 (1) A person for whom an obligation for insurance in a universal pension fund has arisen, shall file an application in a standard format as in appendix No 1 to the pension insurance company managing the fund in which the person would like to participate within the deadline set out in art. 137, para 3 of the Social Security Code (SSC)

(2) A person for whom an obligation for insurance in a professional pension fund has arisen shall file an application in a standard format as in appendix No 2 to the pension insurance company managing the fund in which the person would like to participate within the deadline set out in art. 140, para 3 of the Social Security Code (SSC).

(3) The application forms under para 1 and 2, hereunder referred to as "participation applications" shall be printed out by each pension insurance company on a three-ply chemically coated paper, format A4 with black ink, and the sequence number of the copy shall be placed in the bottom left of the form. Guidelines for the filling-in in accordance with appendices No 1 and 2 shall be printed on the back of the last third copy.

(4) When the participation application shall be prepared as an electronic document with an electronic signature the requirements of the Law on Electronic Documents and Electronic Signature (LEDES) shall be complied with.

Art. 4 (1) The participation application shall be submitted by the person to an office of the pension insurance company through a social security intermediary or as an electronic document as provided for in the LEDES.

(2) When the participation application shall be filed by a social security intermediary, he / she shall obligatory present to the person a documents under art. 123d, para 9 of SSC, which shall identify him / her when exercising the activity for acceptance of participation applications and conclusion of social security contracts on behalf of and at the expense of the respective company.

(3) The pension insurance company shall not accept and shall return participation application with data not filled-in, as well as an application with corrections, when as a result of such incompleteness and corrections the person filing the application cannot be identified, or the data cannot be entered in the data register under art. 6, para 3.

(4) When the participation application shall be filed as a hardcopy, the second copy thereof shall be immediately returned to the person after the registration under art. 6, para 2, the first shall remain with the pension insurance company and the third shall be sent by the 20th day of the current month to the National Revenue Agency (NRA). When the participation application has been filed as an electronic document, an electronic copy of it, signed with the electronic signature of the company, shall be sent

immediately after the registration under art. 6, para 2 to the person filing the application, to the e-mail address stated in the electronic signature, and by the 20th day of the current month – to NRA.

(5) The National Revenue Agency shall check the data entered in the applications received as provided for in para 4 and within a three-month period:

1. it shall enter into an electronic register the people who it shall be subject to insurance in an additional mandatory pension insurance fund;
2. on an electronic carrier it shall prepared a list of the people for whom it shall be established that they are not subject to insurance in an additional mandatory pension insurance fund.

(6) The National Revenue Agency shall send to the pension insurance company within a deadline agreed with it the list under para 5, item 2, together with the respective participation applications, which it shall mark as invalid. The pension insurance company shall notify the people, whose applications are invalid.

(7) In case of finding of errors in participation applications the NRA shall return them to the company where they have been filed, within 15 days as of their receipt under the provisions of para 4, while enclosing a list on electronic carrier of the people filing these applications. The pension insurance company shall notify the people with returned applications and shall explain how they shall correct the errors found.

Art. 5. The people shall be obliged to notify the pension insurance company, managing the fund where they pay social security contributions, for each change in their personal data, entered in the participation application filed by them, by enclosing copies of the documents certifying the respective circumstances.

Section III

Registers

Art. 6 (1) The participation applications shall be entered into an electronic register, which the pension insurance company shall be obliged to keep at its headoffice for each additional mandatory pension insurance fund managed by it.

(2) The entering of the application in the electronic register shall be made on the date of its receipt by the pension insurance company.

(3) Each register under para 1 shall contain the following data:

1. incoming number and date of receipt of the application by the company;
2. date of filing of the application;
3. manner of filing – as a hardcopy or as an electronic document;
4. the full name of the insured person, personal identification number, number of the personal identification card;
5. full names and business identification number of the social security intermediary, when the application has been filed through a social security intermediary;
6. date when the third copy of the application has been sent to the NRA;
7. number and date of the social security contract concluded with the person;
8. any remarks on the entered circumstances.

(4) The electronic registers shall be kept by employees appointed by virtue of written order in accordance with the requirements for the creation and maintenance of an information system in the pension insurance company, approved by the deputy chairperson of the Financial Supervision Commission, head of Social Security Supervision Division.

Section IV

Administrative punitive liability

Art. 7 (1) The pension insurance company, its employees, social security intermediaries or shareholders, who shall violate or shall allow violation of this Ordinance shall be sanctioned in accordance with art. 351 of SSC.

(2) The violations of the provisions of the Ordinance shall be established by virtue of acts drawn up by officials authorised by the deputy chair person of the FSC head of Social Security Supervision Division.

(3) The penal pronouncements shall be issued by a deputy chair person of the FSC, head of Social Security Supervision Division or a person authorised by him.

(4) The establishment of the violations, the issuance, appeal and enforcement of the penal pronouncements shall be made as provided for in the Law on Administrative Violations and Sanctions.

TRANSITIONAL AND CONCLUDING PROVISIONS

§ 1. By 20 December 2006 the pension insurance companies shall align their operations with the requirements of this Ordinance and shall provide for approval their rulebooks on the organisation and activity of the additional mandatory pension insurance funds managed by them to the Financial Supervision Commission.

§ 2. Art. 4, para 5 – 7 shall be applied also in respect of participation applications filed prior to the entering into force of this Ordinance.

§ 3. The forms of the participation applications, approved by the General Manager of the National Social Security Institute by virtue of Instruction No 14 of 2000 on the order for filing participation applications to a professional pension fund and Instruction No 3 of 2001 on the order for filing an participation application to a universal pension fund, as well as participation applications approved by the Financial Supervision Commission by virtue of Decision No 343-3 of 17 May 2006 shall be accepted by and registered with NRA by 20 December 2006.

§ 4. This Ordinance shall be issued on the grounds of art. 137, para 3 and art. 140, para 3 of the SSC and is passed by virtue of Decision No 65-N of 19 November 2006 of the Financial Supervision Commission.

§ 2. The Financial Supervision Commission shall provide guidelines on the implementation of the Ordinance.

CODE OF THE FUND _____ TO _____

incoming No _____

Date: _____

(to be filled in by the pension insurance
company)

(the name of the pension insurance company,
which manages the universal pension fund in
which the person would like to pay
contributions shall be stated or printed)

APPLICATION

for participation into a universal pension fund

First name _____ Paternal name _____ Family name _____

Personal identification number _____

Personal identification card _____

Issued on _____ by _____

Permanent address: District _____

Municipality _____ Postal code _____

Town (village) _____ Residential estate _____

Street _____ No _____ block _____ entrance _____

Floor _____ apartment _____ telephone number _____

I hereby declare that I wish to be insured in universal pension fund " _____ "

(state or print the name of the fund)

managed by _____

(state or print the name of the pension insurance company)

1. I am aware that upon filing of more than one application I am subject to ex-officio allocation to the registered universal pension funds in a manner and order set out by the National Revenue Agency and the Financial Supervision Commission.

2. I commit to notify the pension insurance company within one month as to any change in my personal data.

Date _____

Signature _____

* To be filled in by a social security intermediary or an employee of the company:

First and family name _____

Business identification number / position _____ Signature _____

PLEASE DO NOT FILL-IN BEFORE YOU HAVE READ THE INSTRUCTIONS ON THE BACK!

(back) Instructions for filling-in the application

I. General instructions

People born after 31 December 1959 shall be insured mandatory in a universal pension fund, if they shall be subject to social security under the terms and in the manner set out in Part One of the Social Security Code. Any person subject to voluntary mandatory pension insurance may be insured only in one universal pension fund. Upon filing of more than one participation application to universal pension funds, managed by different pension insurance companies, it shall be considered that the person has not chosen a specific pension fund and he / she shall be subject to ex-officio allocation to the registered universal pension funds in a manner and order set out by the National Revenue Agency and the Financial Supervision Commission. Subject to ex-officio allocation shall also be the persons whose applications are irregular in accordance with Instruction No 1 of 2006 on the order and the method for ex-officio allocation of people who have not chosen an additional mandatory pension insurance fund. The application shall be filed with the pension insurance company managing the additional mandatory pension insurance fund in which the person would like to participate. When the application shall be filed through a social security intermediary the latter shall present a document which identifying him / her for the exercising of the activity related to the acceptance of participation application and conclusion of insurance contracts on behalf of and at the expense of the respective company.

II. Requirements to the filling-in of the application.

1. The application should be filled in legibly, in print letters preferably, within the borders of the respective fields.
2. The full names and permanent address of the applicant should be filled in as they are written on the identity card or another identity document.
3. The pension insurance company should obligatory fill in the data required of it and shall place an incoming number in the top left corner.
4. The box in the bottom part of the application shall be filled in by the social security intermediary or the employee of the company accepting it.
5. The application should obligatory be filled in and filed in three identical copies – the first one remains with the pension insurance company, the second one is returned to the person and the third one is sent to the National Revenue Agency.

CODE OF THE FUND _____ TO _____

incoming No _____

Date: _____

(to be filled in by the pension insurance
company)

(the name of the pension insurance company,
which manages the universal pension fund in
which the person would like to pay
contributions shall be stated or printed)

APPLICATION

for participation into a professional pension fund

First name _____ Paternal name _____ Family name _____

Personal identification number _____

Personal identification card _____

Issued on _____ by _____

Permanent address: District _____

Municipality _____ Postal code _____

Town (village) _____ Residential estate _____

Street _____ No _____ block _____ entrance _____

Floor _____ apartment _____ telephone number _____

I hereby declare that I wish to be insured in professional pension fund " _____ "

(state or print the name of the fund)

managed by _____

(state or print the name of the pension insurance company)

1. I am not receiving pension for insured length of service and age under Part One of the Social Security Code.
2. I am aware that upon filing of more than one application I am subject to ex-officio allocation to the registered professional pension funds in a manner and order set out by the National Revenue Agency and the Financial Supervision Commission.
3. I commit to notify the pension insurance company within one month as to any change in my personal data.

Date _____ Signature _____

* To be filled in by a social security intermediary or an employee of the company:

First and family name _____

Business identification number / position _____ Signature _____

PLEASE DO NOT FILL-IN BEFORE YOU HAVE READ THE INSTRUCTIONS ON THE BACK!

(back) Instructions for filling-in the application

I. General instructions

People working in conditions of first and second category of labour shall be obligatory insured in a professional pension fund. They may be insured in only one professional pension fund. Upon filing of more than one participation application to professional pension funds, managed by different pension insurance companies, it shall be considered that the person has not chosen a specific pension fund and he / she shall be subject to ex-officio allocation to the registered professional pension funds in a manner and order set out by the National Revenue Agency and the Financial Supervision Commission. Subject to ex-officio allocation shall also be the persons whose applications are irregular in accordance with Instruction No 1 of 2006 on the order and the method for ex-officio allocation of people who have not chosen an additional mandatory pension insurance fund. The application shall be filed with the pension insurance company managing the additional mandatory pension insurance fund in which the person would like to participate. When the application shall be filed through a social security intermediary the latter shall present a document which identifying him / her for the exercising of the activity related to the acceptance of participation application and conclusion of insurance contracts on behalf of and at the expense of the respective company.

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4. The box in the bottom part of the application shall be filled in by the social security intermediary or the employee of the company accepting it.
5. The application should obligatory be filled in and filed in three identical copies – the first one remains with the pension insurance company, the second one is returned to the person and the third one is sent to the National Revenue Agency.