

Employer Sign-Up Form

Company Name:	Contact Name:	
Address:	Phone Number:	
City:	Fax:	
Postal Code:	E-mail:	
Date:	Yes, sign me up fo	or our email list.
SafeUnsubscribe link, found at the bottom of every	ur email address, you are granting SPP permission to email you. You can revoke this p email. We take your privacy seriously and our Privacy Policy is available on our web	
Contact		
Employee Name	Employee SIN	*Remittance Amount
Total Remittance	*Complete only if you are sending contributions with your sign-up form.	
Would you like your remittance	form/statement: Mailed Faxed	d E-mailed
Will you be remitting:		
Monthly	_	
Quarterly	Month(s):	
Semi-Annuall Annually		
		

We are excited to offer you a new feature. SPP is now on the Ceridian platform. If you are using Ceridian for your payroll and you wish to submit your SPP contributions through them, please contact the SPP office for details.