

Declaration

- I the undersigned am hereby applying to pay up to a maximum of five (5) years in Social Security Contribution arrears to improve my social security contributions record.
- I hereby accept that the payment rate due is the current **Class 2, rate SA** as applicable on date of this application.
- I hereby accept that I cannot pay Social Security Contributions for periods in which I did not reside in the Republic of Malta.
- I also accept that the Director General (Social Security) can reject this application when it is established that it does not conform with its required eligibility criteria.
- I declare that all information given is to my knowledge true, complete and correct. I understand that if the information given is false, I will be penalised as stipulated in the Criminal Code (Cap. 9.) and can also lose the right for benefit, or part of it, as stipulated by the Social Security Act (Cap. 318.).

Name and Surname

Identity Card Number

Signature

Date

Data Protection Declaration:

The Department of Social Security collects all relevant personal information to provide its services to individuals who qualify for assistance, allowance or non-contributory pensions in accordance with the Social Security Act (Cap. 318.). The Department may verify the information submitted by you in line with article 133 (b) of the Social Security Act to ensure its accuracy in relation to the claim. Personal data may be disclosed to departments / third parties, who may also have access to your data as authorised by law. Personal information may also be exchanged with benefits institutions of other countries to combat and deter fraud, as provided for in international treaties or bilateral agreements to which Malta is a party. You will be informed in due course of the result of your claim after it has been assessed.

Pursuant to the General Data Protection Regulation (EU) 2016/679 (GDPR) and the Data Protection Act (Cap. 586.), we have a legal duty to respect and protect any personal information we collect from you and we will abide by such duty. We take all safeguards necessary to prevent unauthorised access and we do not pass on your details collected from you as a visitor and/or user, to any third party unless you give us your consent to do so or as authorised by law. You may request in writing to access information held about you, and eventually to rectify, and where applicable to erase incorrect information. Such a request is to be addressed to "The Data Controller", Department of Social Security, 38, Ordnance Street, Valletta VLT 1021 or by email to dpsocialsecurity.dss@gov.mt and appropriate action would be taken at the earliest possible time. In making such a request, kindly quote your identity card number, social security number, your name and address and other relevant documentation to identify your case.