Central Provident Fund Board

79 Robinson Road, CPF Building, Singapore 068897
Website: www.cpf.gov.sg CPF Call Centre: 1800-227 1188
Email address: employer-accounts@cpf.gov.sg

Request for Change of Employer's Contact

This form may take you 5 minutes to complete.

Important Notes:

1. P.O. Box and V. Box addresses are not allowed for Principal Place of Business address.
2. The Board will correspond with the employer at the Principal Place of Business address. Examples of correspondences are Payment Advice, Record of Payment, Letters, Contribution Rates Changes and Booklets, Notice To Attend Court, etc.
3. Please sign against any amendments. Use of correction fluid/tape is not allowed.

A) PARTICULARS OF EMPLOYER

CPF Submission Number

										-				-			

Name of Company / Firm / Society / Individual:

New Principal Place of Business address:

_____

_____

Singapore

New Contact Number(s):

Tel No.:									Fax No.:								
Handphone No.:																	

E-mail Address:

B) DECLARATION BY EMPLOYER

I/We agree to abide by the terms in this form and confirm that all the information given in this form is true, correct and complete. I/we shall not hold the CPF Board liable for any losses or damages that I/we may incur due to incorrect information given herein. I/we also agree that the CPF Board has the right to reject this form on any ground whatsoever.

_____	_____	_____	_____
Name of Employer[+]	Designation	NRIC / Passport No. / FIN of Employer[+]	Signature of Employer[+] & Date

[+] Employer refers to the sole proprietor or partner in a partnership. For a limited liability partnership, it refers to a partner or manager. For a company, it refers to the director or manager and for society, it refers to the president or secretary or treasurer. For all other entities, it refers to the name of the person who has been duly authorised to complete the form.

Revised on 30/12/2008