

Sozialkasse des Gerüstbaugewerbes  
- Online-Service -  
Postfach 51 25  
65041 Wiesbaden  
DEUTSCHLAND

**Application for participation in the reporting scheme by internet dialogue (online service)**

Company account number: 

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Country code: 

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Firm name: \_\_\_\_\_

Person to contact: \_\_\_\_\_

The contact is authorized to register/deregister further employees of the company as user of the online service.

E-mail-address: \_\_\_\_\_

Street: \_\_\_\_\_ Number: \_\_\_\_\_

City/town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

From report month/year: \_\_\_\_\_

We apply for granting/changing access to the data transfer functionality by internet dialogue and request that the access data is sent to us. The conditions for participating in the reporting scheme by internet dialogue are available at [www.sokageruest.de/downlads](http://www.sokageruest.de/downlads). We have read and accepted these conditions.

**If you authorize a tax consultant/payroll office to use the online service for you, please complete the following fields in addition:**

Name of the office: \_\_\_\_\_

Person to contact: \_\_\_\_\_

E-mail-address: \_\_\_\_\_

Street: \_\_\_\_\_ Number: \_\_\_\_\_

City/town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

We permit the tax advisor/payroll office access to the online service for my company. The tax advisor/payroll office has received the terms of use from me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Company stamp