## SC4



## Certificate of Pay Related Social Insurance for Year Ended 31st Dec

For employees whose earnings are not assessed for Income Tax under the Irish PAYE system

Name of Employee:											
PPS Number:											
Address:											
Payroll/Works No (if appl	icable):										
PRSI in this employmen	t										
1. Earnings.											
2. Employee's PRSI											
3. Total (employer +	employee)	PRSI.									
4. Total number of w	veeks insura	able emp	oloyme	ent.							
5. Initial social insur	5. Initial social insurance contribution class.										
6. Subsequent social	5. Subsequent social insurance contribution class.										
7. Number of weeks	at the class	s entered	at line	e 5 abo	ove.						
8. Period of employ	ment from	DD/M	M/YY	YY	to	D	D/MN	//YY	YY		

## **DECLARATION**

I declare, for the above-named employee, PRSI contributions have been remitted to the Department of Employment Affairs and Social Protection in accordance with Social Welfare Regulations.

Employer:	(For and on behalf of employer)								
Employer Registered Number:									
E-mail contact:					Of	ficial Stamp			
Date:									

**TO THE EMPLOYEE** 

## THIS IS A VALUABLE DOCUMENT

You should retain this document carefully as evidence of PRSI deducted.

**Note**: There is a **four-year time limit** on claiming refunds of PRSI. You may also require this document as evidence if you need to claim social welfare benefits within the next two years.