

TO: Secretary of Labor & Industry
Attention: Social Security for Public Employees
Room 1719-A Labor & Industry Building
Harrisburg, PA 17121

For Dept of L&I use only:

State SSA# 69-023 _____

FROM: _____
County of _____
Federal Identification Number _____

RE: Resolution Authorizing Participation in the
Federal Social Security Program

Whereas, the Social Security Act has been so amended by the Congress of the United States as to permit political subdivisions of the several states to extend to their employees and officers the benefits of Social Security;

And, whereas, under the Act of 1951, P.L. 1833, as amended, the General Assembly of the Commonwealth of Pennsylvania has enacted enabling legislation authorizing political subdivisions of the Commonwealth to enter into agreements with the state agency to provide Social Security coverage to its employees and officers;

And, whereas, it is the opinion of the governing body of the above-captioned political subdivision that extension of Social Security coverage will be of great benefit not only to the employees but likewise to this political subdivision, by attracting to it and enabling it to retain the best of personnel, thereby increasing the efficiency of its government, and it is further opined that the payment by this political subdivision of its portion of the cost of said coverage is a payment for the benefit of this political subdivision;

Not, therefore, be it resolved/ordained by the governing body that the political subdivision become a participant in the Social Security program and that the benefits of Social Security be extended to its employees and officers;

Be it further resolved/ordained that the proper officers be authorized to execute and deliver to the state agency the Plan and Agreement required under the provisions of the Social Security Act and said enabling act to extend coverage to the employees and officers of this political subdivision;

Be it further resolved/ordained that the treasurer of this political subdivision be authorized, and he/she is hereby authorized, to make all required payments into the appropriate fund(s) established by said enabling Act and federal regulations to establish such system of payroll deductions from wages of employees and officers as may be necessary to their coverage under the Social Security program;

Be it further resolved/ordained that the governing body of this political subdivision hereby appropriate from the proper fund or funds of the political subdivision the amounts necessary to pay into the appropriate fund(s) as provided in the enabling Act and in federal regulations and in accordance with the Plan and Agreement;

Be it further resolved/ordained that the proper officers of this political subdivision do all things necessary to the continued implementation of said Social Security program in accordance with the provisions contained in the Plan and Agreement and the said laws:

Be it further resolved/ordained that the participation in the Social Security program by this political subdivision commence as of the _____ (date) day of _____ (month), _____ (year).

Dated this _____ (date) Day of _____ (month), _____ (year).

Attest: _____ (Name of Entity)

(Signature) By: _____ (Signature)
(Type Name & Title here)

CERTIFICATE OF AUTHENTICATION

COMMONWEALTH OF PENNSYLVANIA:

COUNTY OF _____ : SSN: _____

I, _____ (name), _____ (title/office held)
OF CORRECT COPY OF THE RESOLUTION TO PARTICIPATE IN THE SOCIAL SECURITY PROGRAM, AS PASSED AND APPROVED BY SAID POLITICAL SUBDIVISION ON THE _____ (date) DAY OF _____ (month), _____ (year), AS SAME APPEARS FROM THE RECORDS AND FILES IN MY OFFICE.

WITNESS MY HAND AND SEAL * THIS _____ (date) DAY OF _____ (month), _____ (year).

Signature

*IF NO CORPORATE SEAL, THE FOLLOWING AFFIDAVIT MUST BE TAKEN.

SWORN AND SUBSCRIBED TO BEFORE ME THIS

_____ (date) DAY OF _____ (month) _____ (year).

Signature