

REGULAR ACTIVITIES IN TWO OR MORE MEMBER STATES (MULTISTATE WORK- ART. 13 OF REGULATION (EC) N° 883/2004)

Introduction

The application must be completed by the employer in cases where the insured normally carries out his professional activity in two or more countries of the European Union (EU), the European Economic Area (EEA), Switzerland (Article 13 of Regulation (EC) N° 883/2004 and Article 16 of Regulation (EC) N° 987/2009) or the United Kingdom (in accordance with Article SSC.12 of the Trade and Cooperation Agreement adopted on 24 December 2020 including a Protocol on Social Security Coordination) (hereinafter the "States concerned"), in order to determine the applicable legislation:

- for **residents of Luxembourg**, the applicable legislation is determined by the competent Luxembourg body, i.e. the Social Security Center (*Centre commun de la sécurité sociale* - CCSS), in accordance with the above-mentioned articles. If Luxembourg legislation is designated as being applicable, the competent body will issue an A1 certificate.
- for **residents outside Luxembourg**, the applicable legislation is determined by the competent body in the country of residence in accordance with the above-mentioned articles. If Luxembourg legislation is designated as being applicable, the CCSS will issue an A1 certificate.

The application must be submitted to the CCSS **before the start of the activity in two or more of the States concerned**.

The application does not need to be completed for a posting in a State concerned or a third country.

This application concerns the procedure established by the CCSS for the exercise of an activity in two or more of the States concerned and, where applicable, the issue of an A1 certificate.

This request does not exempt the employer and/or employee from carrying out the formalities prescribed by the States concerned where the activity is carried out (i.e. the state of employment) or by the State of residence (e.g. registration under a system for listing persons carrying out a professional activity in the territory; transmission of information to the State of residence for the purposes of determining the applicable legislation).

Explanation of the various sections to be completed

General

When the country code is required in a section, please refer to the [ISO 3166-1 ALPHA-2 standard](#).

Please note that incomplete or inaccurate information may lead at any time to the withdrawal of the issued A1 certificate based on this information and to a change, with retroactive effect, where applicable, in the membership of the Luxembourg social security system.

1) Data concerning the employer

The employer registration number to be indicated is the one allocated by the CCSS.

The name of the employer should be given as it appears in the Luxembourg Trade and Companies Register (or its foreign equivalent, where applicable), together with the employer's contact details.

2) Data concerning the insured

The social security number to be entered corresponds to the national number shown on the insured person's social security card.

In the last and first name section, the last and first name(s) from the insured person's civil status must be entered. The spouse's name must be entered under the marital name heading.

The postal code, town and country code must be completed. It is the employer's responsibility to check with his employee that the address given to the CCSS is up to date.

If the habitual address of the insured is different from the legal address, it must also be specified.

3) Data concerning the insured's multistate work for the employer

Box 1 of point 3:

The start and end dates of the foreseeable period of work in two or more of the States concerned must be indicated. The A1 certificate will be limited to a maximum period of five years (three years if the framework agreement on telework is applied), depending on the determination of the applicable legislation by the competent State. In case of a status change, a new application must be submitted.

To avoid triggering multiple procedures, it is advisable to declare telework for a projected period of at least 12 months (or as long as possible) or until the end of the employment contract, whichever comes first.

Box 2 of point 3:

If the employer is an international transport company, indicate whether the insured is a member of the travelling or sailing personnel by ticking the appropriate box.

It should then be specified whether the activity carried out by the insured is road or river transport by ticking the appropriate box.

In the case of river transport, the name of the vessel and its ENI number (European Number of Identification) must be specified.

This form should not be used to declare the activities of Rhine boatmen.

Box 3 of point 3:

Indicate whether the activity in two or more Member States is carried out partly or entirely in telework.

If the insured fulfils the conditions of the framework agreement on telework¹, it is necessary to indicate whether the insured wishes the framework agreement to be applied or not. Please note that the framework agreement can only be applied if the insured meets all the conditions set out in the agreement.

4) Data concerning the locations for all professional activity

The employer **must** indicate the insured's employment rate (percentage) by country (including Luxembourg, where applicable).

The employment rate without telework must be indicated separately from the employment rate in telework:

- Column "% A": any activity that is **not carried out** in telework;
- Column "% T": any activity **carried out** in telework.

The sum of all the percentages ("% A" and "% T") indicated in the fields of the table must equal 100%.

It is imperative to indicate the foreseeable monthly percentage of the activity carried out (telework or not) in each State of employment and not only in the State of residence.

¹ Framework Agreement on the application of Article 16 (1) of Regulation (EC) No. 883/2004 in cases of habitual cross-border telework: <https://socialsecurity.belgium.be/fr/activites-internationales/teletravail-transfrontalier-dans-lue-leee-et-la-suisse>

5) Data concerning the insured's other activities

It is essential for the employer to find out from the insured whether he carries out another professional activity (self-employed or on behalf of another employer) and to specify the country(ies) in which it is carried out and its type.

This information is of the utmost importance in determining the legislation applicable to the insured.

Signature

Please indicate, by ticking the appropriate box, whether the form is completed by the employer or by an authorised natural person or legal entity.

The person signing the form must enter his/her last and first name(s). If they are working for an authorised representative, they must also specify the latter's company name.

The signature and the location and date of signature are also mandatory.

IMPORTANT

By signing, the employer or the authorised representative confirm the accuracy of the information given in this document and declare that they are aware that any inaccurate declaration on their part, or failure to declare any change, may result in a change to the affiliation, and may be subject to penalties as provided for in the Social Security Code and the Penal Code.

¹ Framework Agreement on the application of Article 16 (1) of Regulation (EC) No. 883/2004 in cases of habitual cross-border telework: <https://socialsecurity.belgium.be/fr/activites-internationales/teletravail-transfrontalier-dans-lue-leee-et-la-suisse>