



SIN Online (eSIN) Application Guide

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Table of Contents

Introduction2

 What you need before you apply online.....2

Translation requirements.....3

 Proof of Address3

SIN Online Application Guide5

Contact Us 13

Links..... 14

Checklist..... 15

Annex 1 - Example of Letter Template - Attestation of Address for Organization and Worker..... 16

Note: If there is a discrepancy between this document and the information contained on Canada.ca, please go by the Canada.ca website, as it would contain the most up-to-date information

Introduction

The Social Insurance Number (SIN) is a 9-digit number that you need to work in Canada or to have access to government programs and benefits.

You can go online or send a paper application by mail to:

- apply for a SIN
- obtain a confirmation of your SIN, and/or
- to amend your SIN record

There is no fee to apply for a Social Insurance Number (SIN).

Please consult the "[Social Insurance Number – Required documents](#)" page to obtain the most updated information on all the required documents.

What you need before you apply online

To apply online you will need to upload copies of at least 3 different documents:

1. A digital copy of an original valid **primary identity document** that proves your identity and legal status in Canada (you must provide both sides of the document if there is identity information on each side);
2. A digital copy of an original valid **secondary identity document** to confirm your identity; and,
3. A digital copy of a **proof of address**;
4. A digital copy of an original valid **supporting document** (only applicable if the name on your primary document is different from the name on your secondary document or than the name on your online SIN application form).

If you are applying for a SIN online for someone else as a parent, legal guardian or legal representative, you will need to provide additional documents.

Note: Failure to provide required documentation will result in the rejection of your application.

Prior to submitting your application, you must:

- Attach all required documents.
- Ensure all attached documents are legible.
- Provide an acceptable proof of address containing your complete name (family name and given name) that appears on the primary, secondary or supporting document. If multiple pages, please include only the page containing your full name, your address and the institution or organization's name.

Translation requirements

If you submit a document that is not in English or French, **you must also submit:**

- an English or French translation of the document; and,
- an attestation or affidavit written and signed by the translator.

Attestation	vs	Affidavit
If the document has been translated by a certified translator , you must submit an attestation.		If the document has been translated by a translator who is not certified , you must submit an affidavit.
This is a document stating that the translation is a true and accurate version of the original text. (A certified translator is a member of a provincial or territorial organization of translators and interpreters.)		This is a document stating that the translation is a true and accurate version of the original text. The translator must sign the affidavit before a commissioner for oaths or a commissioner for taking affidavits. (A commissioner for taking affidavits is appointed by a province or territory.)

Note: Translations by family members are not acceptable. (A family member is defined as being a parent, guardian, sibling, spouse, grandparent, child, aunt, uncle, niece, nephew or first cousin.)

Proof of Address

An acceptable proof of address is a document or an **attestation letter** signed by the issuer, issued by one of the following: a government, a company, an institution, an organization, a landlord or an employer, which contains the following two elements:

- applicant's name (family name and given name) that appears on the applicant's primary, secondary or supporting document, or, if applying on behalf of someone else, the parent, legal guardian or legal representative's name, as it appears on the primary, secondary or supporting document; and,
- applicant's address or, if applying on behalf of someone else, the parent, legal guardian or legal representative's address. The proof of address must clearly show the applicant's address and match the address on the online SIN application.

A response to the SIN request will be mailed to the **applicant's address**.

Notes:

- An envelope is not acceptable as a proof of address.
- Correspondence from the Social Insurance Number program, such as a previous Confirmation of SIN letter or a reject letter is not acceptable proof of address.
- SIN confirmation will **not** be sent to an employer's address, unless the client resides on the employer's premises. In such cases, the document or attestation from the employer must clearly state that the employee resides at that address.

Examples of acceptable proof of address:

- a letter or document from a government (federal, provincial, territorial or foreign)
- a letter or document from a financial institution (bank statement, credit card statement, mortgage contract or statement, etc.)
- a residential tenancy agreement/ lease
- a bill (from among others a telecom provider, a cable provider, a utility provider, etc.)
- any document issued by a school, college or university that shows your address
- an employment contract (must contain a section that confirms address of the applicant)
- a letter from an organization or an institution or an employer attesting the address of the applicant where correspondence will be sent. The organization/institution or employer must sign the letter confirming the address (see [Annex 1](#) " Example of letter template - Attestation of Address for Organization and Worker)

Please visit the "Proof of address" section of the [Social Insurance Number – Required documents](#) page for the most up-to-date information on proof of address requirements.

Important notes

- The proof of address document **MUST MATCH** the address indicated in the application.
- **An organization/employer/institution is not an authorized representative unless there is legal documentation identifying them as such.** Organizations/ employers/institutions may assist their clients or employees in applying for their SIN, however, **the applicant must be present and understand what is being completed during the application.** (They should not indicate that they are applying for someone else as a legal representative if this situation does not apply, as this will result in the application being rejected).
- Temporary SINs (beginning with a 9) are issued to temporary residents who are neither Canadian citizens nor permanent residents but are permitted to work in Canada. Temporary SINs have an expiry date corresponding to the expiry date of the immigration document. The employer must ensure that all employees who have a SIN beginning with a "9" are authorized to work in Canada and their immigration documents has not expired.

- If the immigration document is expired, the temporary resident has to contact IRCC to obtain a valid document before being authorized to work. Once the new immigration document is obtained, they will be able to submit an application for their SIN record to be updated with the new expiry date.
- The temporary resident can still work in Canada while they await the processing of their SIN application if they have proper documentation allowing them to work in Canada.
- For more information on the Employer's key responsibilities, visit the [Employer Information –Social Insurance Number \(SIN\)](#).

SIN Online Application Guide

The instructions on applying for a SIN online are described below supported by visual aids. All mandatory fields are marked with a red asterisk (*). You can access the eSIN application by visiting this link:

<https://sin-nas.canada.ca/en/Sin/>

Step 1: Select the application type

Social Insurance Number Application (SIN)

0%

Answers to fields and questions with an asterisk (*) are mandatory.

Application Type

Type (required) *

Ap

First Social Insurance Number (SIN)
Update or Correction to SIN record
Confirmation of SIN
Legal Change of Name
Change of Status
Change of the Expiry Date (900 series SIN)
Public Trustees
Other - Specify

Select the application type from the drop down menu

Step 2: Applicant information

Applicant's Information

First Given Name (required) *

Other Given Name(s)

Family Name (required) *

Note: The applicant is the person for whom the SIN is being requested

Enter the first given name of the applicant

Enter other given name(s) of the applicant if applicable

Enter current applicant family name. If different than the family name on the proof of ID, a supporting document must also be provided

Applicant's Family Name

Family Name at Birth (required) *

Other Family Name(s) Previously Used

Enter the applicant's family name at birth

If the applicant has used family names other than stated on the proof of ID, enter them here separated by a comma

Date of Birth (required) *

Date of Birth "MM/DD/YYYY"

Day Time Telephone Number (required) *

Evening Telephone Number

Language of Correspondence (required) *

Enter the applicant's date of birth or select the applicant's date birth from the calendar

Enter the applicant's daytime and evening phone number

Select preferred language of correspondence for the applicant

Applicant's Parent

Given Name(s) (required) *

Family Name at Birth (required) *

Enter the given name and family name of applicant's parents **at birth**

Applicant's Parent

Given Name(s)

Family Name at Birth

The client can chose which parent is listed first and second (if applicable)

Applicant's Gender

Applicant Gender

Check if the applicant is a twin, triplet, etc

Select gender from the drop down menu (not mandatory)

Check box if the applicant is a twin, triplet, etc.

Status

Applicant Status in Canada (required) *

So

- Canadian Citizen
- Registered Indian
- Permanent Resident
- Temporary Resident
- Other

Select the applicant's current status in Canada from the drop down menu

Note: Individuals on a work or study permit are considered Temporary Residents

Status

Applicant Status in Canada (required) *

Temporary Resident

Please indicate the type of primary identity document you will submit with your application (required) *

Primary Identity Document Expiry Date (required) *

Year Month Day

Indicate the type of primary identity document to be submitted with the application (required for the Permanent and Temporary Resident primary identity documents)

Enter the expiry date that appears on the primary identity document (required for Temporary Resident primary identity documents)

Are you the legal representative of an estate applying for a deceased individual? (required) *

No Yes

Select Yes if you are a legal representative or estate applying for a deceased individual

Applicant's Birth Place

City, Town or Village (required) *

Country (required) *

Province/Territory/State (required) *

Enter the applicant's place of birth information

City, Town or Village

Country

Province, Territory or State

Social Insurance Number

Did the Applicant ever have a SIN Number? (required) *

If Yes, Write the Nine Digit Number

SIN history

Select the applicant's SIN history from the drop down menu

Enter previous SIN information (if applicable)

Mailing Address (Must match the address on your proof of address document)

In care of (if different than the Applicant's Name)

Apartment, suite or unit No.

Number and Street *

City, Town or Village *

Country *

Name of the Country

Province/Territory/State

Province/Territory/State

Postal/Zip Code *

Enter In care of (if applicable) Note: leave blank unless you are applying as a legal representative

Enter the apartment, suite or unit No. (if applicable)

Enter the civic number and street (ex 123 North st)

Enter city, town or village name

Select country from the drop down menu

Select province, territory or state from the drop down menu

Enter the postal/zip code

Important note: The address information must match the proof of address document that is submitted with the application

Step 3: Privacy Statement

Privacy Statement

The personal information you provide is collected under the authority of the Employment Insurance Act (EIA) and the Department of Employment and Social Development Act (DESDA) for the purpose of assigning a Social Insurance Number (SIN) to you or your child. Participation is voluntary; however, refusal to provide your personal information will result in you or your child not receiving a SIN. The information you provide may be shared with federal departments and agencies that are authorized users of the SIN and in accordance with the Treasury Board Secretariat Directive on the Social Insurance Number for the administration of benefits and services; and/or with federal and provincial departments for the administration and enforcement of the legislation for which they are responsible. The information may also be used and/or disclosed for policy analysis, research and/or evaluation purposes, however, these additional uses and/or disclosures of your personal information will not result in an administrative decision being made about you. You have the right to the protection of, access to, and correction of personal information, which is described in the Personal Information Bank (ESDC PPU 390 Social Insurance Number Register). Instructions for obtaining this information is outlined in the following government publication entitled [Information about programs and information holdings](#). You have the right to file a complaint with the [Privacy Commissioner of Canada](#) regarding the institution's handling of your personal information.

I accept the Privacy Statement (required) *

Next

You (the applicant) must read and understand the privacy statement as seen above. After having read the statement, check the box next to "I accept the Privacy Statement"

Once you have entered all mandatory information, read and accepted the Privacy Statement, click on "Next"

Step 4: Acknowledgement

If you are applying for someone else as a legal representative, you must select no to the following question:

Social Insurance Number Application (SIN)

Acknowledgement

Are you applying for yourself?
 No Yes

Representative Relationship (required) *

Telephone Number of the Representative (required) *

Printed Name of Representative (required) *

Select your relationship to the applicant using the drop down menu

Enter your telephone number

Type in your full name (representative)

NOTE: When selecting the representative relationship to the applicant, information about documents required for that relationship is displayed.

If you are applying for yourself:

Social Insurance Number Application (SIN)

50%

Acknowledgement

Are you applying for yourself?
 No Yes

Print your Name (required) *

In order to obtain a SIN, you must provide the documents below to prove your identity and legal status in Canada. Failure to provide required documentation will result in the rejection of your application.

- a digital copy of an original valid [primary document](#) (you must provide both sides of the document if there is identity information on each side)
- a digital copy of your original valid [secondary document](#)
- a digital copy of your [proof of address](#)
- a digital copy of your original valid [supporting document](#) (only applicable if the name on your primary document is different from the one on your secondary document or than the name on your online SIN application form)

Important:

- digital copies of your documents must be clear and legible
- if you wish to have the confirmation of SIN letter mailed to an address other than your own, you must [apply by mail](#)

Note:
The same document requirements apply to children over the age of 12, but under the age of majority, that are applying for themselves. If the child cannot provide the required documents, a representative must apply on the child's behalf.

Reminder: An employer/organization is not an authorized representative unless there is legal documentation identifying them as such. Employers or organizations may assist their employees or clients in applying for their SIN, however, the applicant must be present and understand what is being completed during the application.

Step 5: Upload Documents and Application Submission

This is where you must upload all required documents applicable to the application. Failure to provide required documentation will result in your application being rejected. In order to add the required documents, you must first save them to your computer. The digital copy of your document must be clear and legible. **The document must include all the information that appears on the front and the back of the document.**

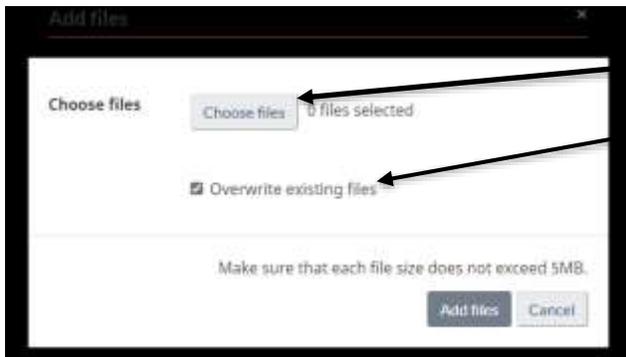
The electronic file must be in one of these file formats: pdf, jpeg, gif, png.

The file name cannot contain any special characters: accents, tildes, symbols, etc. (examples: è, é, ñ, &, *, #).

Upload Documents

There are no folders or files to display.

+ Add files



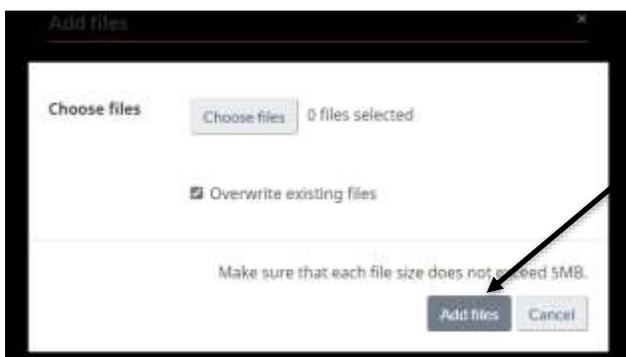
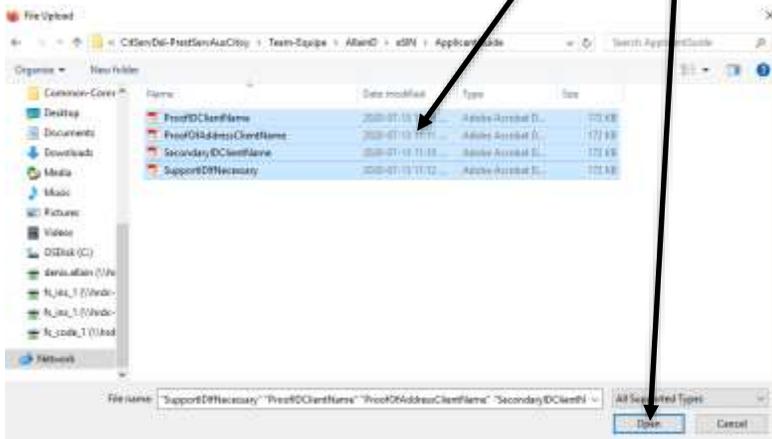
Click on + "Add files"

You will see this window. Click on "Choose files"

Note: By selecting "Overwrite existing files", your previously uploaded files will be erased from the application

Select the required files that are located on your computer/device.

Click "Open" (Note not all computers or devices will have the same menu. Please consult your user manual for instructions)



After having selected the files, click on "Add files"

Ensure that all required documents are showing on this page

Upload Documents



The screenshot shows a table with two columns: 'Name' and 'Modified'. There are four rows of files, each with a 'Delete' button in a dropdown menu. An 'Add files' button is in the top right corner.

Name ↑	Modified	
ProofIDClientName.pdf (171 KB)	less than a minute ago	▼
ProofOfAddressClientName.pdf (171 KB)	less than a minute ago	Delete ▼
SecondaryIDClientName.pdf (171 KB)	less than a minute ago	▼
SupportIDIfNecessary.pdf (171 KB)	less than a minute ago	▼

If a file was added in error, you can delete it by clicking on the downwards arrow and selecting "Delete"

Application Submission

I certify that the information provided on the application form is true, accurate and complete. *

Your application will not be processed if required documents are not provided.

Previous Submit

Read and check the acknowledgement box
Click on "Submit"

Protected-B



Contact Us

Website: www.canada.ca

By phone: 1-866-274-6627 - Employers can contact Service Canada to verify the SIN of any present or former employees. They will be required to provide their business number (issued by the Canada Revenue Agency) as well as appropriate identification about the company and the SIN holder.

Agents are available Monday to Friday, 8:30 am to 4:30 pm Canadian Local Time, except on statutory holidays

Teletypewriter (TTY): 1-800-926-9105

If you have a hearing or speech impairment and use a teletypewriter (TTY).

Outside Canada: 506-548-7961

Note that long distance charges apply. Agents are available Monday to Friday, from 8:00 am to 8:30 pm (Atlantic Standard Time).

Local contact:

Please contact your local Citizen Service Specialist to obtain the most up-to-date copy of this document.

Links

Social Insurance Number

[Overview](#)

[Who needs a SIN](#)

[Apply](#)

[SIN Online Application](#)

[Receiving and updating your SIN](#)

[Protecting your SIN](#)

[Reporting a death](#)

[Required documents](#)

Checklist

Ensure that you have:

- completed all required fields
- read and understood the privacy statement
- checked off the privacy statement checkbox
- entered all information in the Acknowledgement information
- uploaded your required documents (documents must be clear and legible, must include all the information that appears on the front and the back of the document, in pdf, jpeg, gif, or png format. The name cannot contain any special characters)
 - Primary document
 - Secondary document
 - Proof of address
 - Support documents (if applicable)
 - Support documents if you are applying for someone else (if applicable)
- checked off the box beside the acknowledgement statement
- clicked on "SUBMIT"

Annex 1 - Example of Letter Template - Attestation of Address for Organization and Worker

INSERT: Company LOGO/Letterhead (optional)

To: Government of Canada

Re: Address Attestation

For the purpose of the Social Insurance Number of the undersigned, please use this letter as a confirmation of address.

Employee Name:

[DELETE THIS RED TEXT BEFORE SENDING: THE WORKER'S NAME ENTERED HERE MUST MATCH THE NAME ON THE APPLICATION. THE NAME MAY DIFFER IF THE CLIENT PROVIDES A SUPPORTING DOCUMENT THAT SHOWS A LINK BETWEEN THE TWO NAMES]

The employee's address where correspondence can be received is:

[DELETE THIS RED TEXT BEFORE SENDING. WORKER'S ADDRESS GOES HERE. NOTE ONLY INCLUDE ONE ADDRESS, THE ADDRESS THAT MATCHES WHAT IS ENTERED ON THE SIN ONLINE APPLICATION FORM.]

Attestation

[DELETE THIS RED TEXT BEFORE SENDING. USE THIS STATEMENT IF THE EMPLOYEE DOES NOT RESIDE ON EMPLOYER PREMISES]

[ORGANIZATION/INSTITUTION/EMPLOYER'S NAME GOES HERE] attests that the above address is the employee's current address.

OR

[DELETE THIS RED TEXT BEFORE SENDING. USE THIS STATEMENT IF THE EMPLOYEE RESIDES ON EMPLOYER PREMISES]

[ORGANIZATION/INSTITUTION/EMPLOYER'S NAME GOES HERE] attests that the employee resides at the above address during their employment with our company.

With thanks,

Organization/Institution/Employer Signature
<p>[DELETE THIS RED TEXT BEFORE SENDING. SIGNATURE GOES HERE]</p> <p>Name:</p> <p>Position/Title:</p> <p>Date:</p>

