EPF Contribution File Format.

**File formatting:**

|  |  |
| --- | --- |
| **Line** | **Description** |
| 1 | Header Label |
| 2 | Header Data |
| 3 | Payment Record Label |
| 4 and onwards | Payment Record Data |
| Before last line | Trailer Record Label |
| Last line | Trailer Record Data |

**Header Record**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Label Name** | **Length** | **Value** | **Data Type** | **M/O** | **Scenario** | **Error Message** |
| 1 | Header RecordSIT 013 & SIT 012 | 1 | H - header recordOnly allow H for this field. | Alphabet | M | Header empty | Header does not start with “H” |
| 2 | Employer EPF NoSIT014 | 19 | Employer EPF numberLeft justify | Numeric | M | 1. Employer EPF No. empty2. Employer EPF No not numeric | 1. Employer EPF No. is required2. Employer EPF No. should be numeric |
| 3 | Contribution Month | 6 | MMYYYY | Numeric | M | 1. Contribution Month empty2. Contribution Month not numeric | 1. Contribution Month is required.2. Contribution Month should be numeric |
| 4 | Contact Person Name | 40 | EPF will contact this person if the employer or employee detail is wrong. | Alphabet | O |  | - |
| 5 | Contact Phone No | 20 | Please put 6 in front of the phone number. We assumed the international code should be given by user. System will not make any correction on the phone number | Numeric | O |  | - |
| 6 | Total RecordSIT 015 | 5 | Total record in this file | Numeric | M | 1. Total Record empty2. Total Record mismatch3. Total Record not numeric. | 1. Total Record is required.2. Invalid Total Record3. Total Record should be numeric |
| 7 | Total AmountSIT016 | 15,2 | Total Amount in this fileAccepting amount format:-9999999999999.999999999999999.99999999999999.9999999999999 | Numeric | M | 1. Total Amount empty2. Total Amount mismatch3. Total Amount not numeric. | 1. Total Amount is required.2. Invalid Total Amount3. Total Amount should be numeric |

**Details Record**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Label Name** | **Length** | **Value** | **Data Type** | **M/O** | **Scenario** | **Error Message** |
| 1 | Payment RecordSIT016 | 1 | P - payment recordOnly allow P for this field | Alpha | M | Detail Record empty | Detail Record does not start with “D” |
| 2 | Employer Contribution | 15,2 | Amount contributed by EmployerAccepting amount format:-9999999999999.999999999999999.99999999999999.9999999999999 | Numeric | M | 1. Employer Contribution Amount empty2. Employer Contribution Amount not numeric | 1. Employer Contribution Amount is required. 2. Employer Contribution Amount should be numeric |
| 3 | Member Contribution | 15,2 | Amount contributed by member(employee)Accepting amount format:-9999999999999.999999999999999.99999999999999.9999999999999 | Numeric | M | 1. Member Contribution Amount empty2. Member Contribution Amount not numeric | 1. Member Contribution Amount is required. 2. Member Contribution Amount should be numeric |
| 4 | Member Wages | 15,2 | Wages of the employeeAccepting amount format:-9999999999999.999999999999999.99999999999999.9999999999999 | Numeric | O |  | - |
| 5 | Bene IC / ID / Registration No. | 15 | Vendor code, bene IC no, business reg. no | Alphanumeric | M | Member ID empty | Member ID is required. |
| 6 | Bene Name | 80 |  | Alphanumeric | M | Member Name empty | Member Name is required. |
| 7 | Member EPF No | 19 | Employee EPF No. also | Numeric | M | 1. Member Name empty2. Member Name not numeric | 1. Member EPF No. is required.2. Member EPF No. should be numeric. |