

## EMPLOYER REPORT OF CHANGE TO ACCOUNT

Tired of paperwork? We can help! Make Changes to your Unemployment Insurance tax account online. It's fast, easy, accurate, and secure!

Visit SUITS, DEW's online tax  SECTION A: EMPLOY	•		r instructions on h	ow to use SUITS, please	visit <u>https://dew.sc</u>	2.gov/suits.
			DEW Assount	Nyamaham	EEIN.	
Business Name:			_ DEW Account	Number:	FEIN:	
SECTION B: CHANGE	S TO ACCOUNT					
Eff	fective Date of Cha	nges being	made	//	/	
1. Add/Remove Owner.	<b>Officer</b> (Individual cha	unges within th	e organization tha	t <b>DO NOT</b> change the e	ntity.).	
<u>Name</u>	<u>SSN</u>	<u>Title</u>	Ownership %	Home Add	<u>lress</u>	ADD or REMOVE
						☐ Add ☐ Remove
						Add Remove
						Add Remove
2. Change of Physical I	Location.					
	Physical Location	□ Jo	b/Construction Si	e Empl	loyee Residence	
	<b>J</b>				.,	
(Location Address)			(City)	(State)		(Zip Code)
3. Change in Tax Maili	ng Address.					
(Address or PO Box)			(City)	(State)		(Zip Code)
4	#-9P A 33					
4. Change in Benefits M	Tailing Address.					
(Address or PO Box)			(City)	(State)		(Zip Code)
				Please attach the de		
<ul> <li>5.</li></ul>			-414	with the Secretary	of State verifying	
	rolina continues in op rolina suspended or ei			rressor		
	rolina acquired by suc	-			cation of Business.	Acquisition/Merger or
Purchase/Sale)						
IMPORTANT, If you check process the request.	ted line 5 through 8, yo	ou must provi	de a sufficient ex	planation below and/or	complete the add	litional form for us to
process the request						
I certify that the information en						
for this form to be processed, the	e signatory must be on file	e with dew as a l	ousiness owner, offi	cer, partner or agent duly	authorized to act on	behalf of this employer.)
Signature of owner, partner, member or executive officer			Title			
Print name of above signature			Date			
_						
Telephone number			Email			