



FEDERAL IDENTIFICATION NO: _____

NHES EMPLOYER ACCOUNT NO: _____

EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

EMPLOYER TELEPHONE NO : () _____

EMPLOYER FAX NO : () _____

EMPLOYER CONTACT PERSON : _____



NEW HIRE REPORTING FORM

RETURN TO: NHES -NEW HIRE PROGRAM

PO Box 2092

CONCORD NH 03302-2092

FAX: (603) 224-0825

TOLL FREE FAX: 1-855-253-9072

Note: For "Type of Hire" write "**W**" for W-2 EMPLOYEE or "**I**" for 1099 INDEPENDENT CONTRACTOR

****Required Fields***

<u>*SOCIAL SECURITY #</u> (Not Fein)	<u>*EMPLOYEE NAME</u> **(or Independent Contractor)	<u>*HOME ADDRESS</u> (NOT PO BOX)	<u>*CITY/TOWN</u>	<u>*STATE</u>	<u>*ZIP</u>	<u>*FIRST DAY OF WORK</u>	<u>WORK STATE</u>	<u>*TYPE OF HIRE</u> <u>"W" OR "I"</u>

Note: All new hires must be reported within 20 days of the date hired.
** Independent contractors are reportable if contractor operates business as a sole proprietor and you expect to reimburse individual more than \$2,500 for services for one or more contracts in a calendar year. (EMP308.02(a)(3)).
Indicate contractor's name, home or business address, social security number and first day of work.

Online "New Hire" filing link can be found on homepage <http://www.nhes.nh.gov/>