

STATUS REPORT FOR DOMESTIC (HOUSEHOLD) EMPLOYMENT
CONFIDENTIAL RECORD Pursuant to IC 22-4-19-6, IC 4-1-6

- Original Report
 Amended
 Preassigned

Please type or print in ink.

1. Legal Name of Employing Unit _____

2. Street Address _____

City _____ State _____

ZIP Code _____ Indiana County _____

OFFICE USE ONLY		
Account Number	Effective Date	
Qualified On	Under Section	
Pymt. Method	Merit Rate Start Date	
Business Code	Merit Year Rate	Sic Code
	_____ %	
Country Code	_____ %	Size Code
	_____ %	
County Code	_____ %	_____ %
	_____ %	
Reviewed By	Merit Rate Requested _____	Federal Cert. Requested _____

3. Federal ID Number: _____

- Individual Corporation Partnership Administrator
 Estate Trust Guardian Other Fiduciary (Type)

Domestic includes those services which are of a household nature in or about a private home or college fraternity.

4. On what date did you first employ individual(s) in the State of Indiana? _____
5. Did you pay \$1,000 or more in wages to individuals employed in domestic services(s) during any calendar quarter in either the current or a preceding calendar year? Yes(Quarter/Year) _____ / _____ No
6. Name _____ Name _____
Title _____ Title _____
Social Security Number _____ Social Security Number _____
Residence Telephone Number _____ Residence Telephone Number _____
7. Are you an employer under Indiana Law for employees other than domestic? Yes No
(if yes, enter Indiana Unemployment account number) _____

I hereby certify that I have carefully examined the foregoing questions and that my answers thereto and all information contained herein are true and complete to the best of my knowledge and belief.

Prepared By _____ Date _____
()
Preparer / Accountant Phone Number _____
Employer Signature _____ Title _____