

## REGISTRATION FOR STATE INFORMATION DATA EXCHANGE SYSTEM (SIDES) E-RESPONSE

Complete this form to receive and respond to Employer Notice of Claim Filed forms or Earnings Verification requests electronically rather than by U.S. Postal Service mail when someone you employed files a claim for Nevada unemployment insurance benefits and you are the claimant's <u>last employer or next to last employer</u>.

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Business Name	
Mailing address where you currently receive unemployment insurance benefit claim notices (No., Street, P.O. Box, City, State, Zip)	
Federal Employer Identification Number (FEIN)	Nevada Unemployment Insurance (UI) Tax Account Number (SEIN)
Contact Person's Name	Contact Person's Telephone Number
Email address to receive notification of claim filed forms that are ready to view and respond to on the SIDES E-Response website	
By checking "I Accept" below, you agree to the following: 1) You will no longer receive paper unemployment insurance benefit claim notices by U.S. Postal Service mail. Instead, you will receive an email notification whenever an Employer Notice of Claim Filed or an Earnings Verification request is ready for you to view and respond to electronically via the SIDES E-Response website. 2) You must add <a href="https://linearchy.com/">UIASIDESE-Response@detr.nv.gov</a> to your email address book and if applicable, notify your IT department to ensure that these email notifications reach your inbox instead of being blocked by spam filters.	
The Employer Notice of Claim Filed response time limit specified by law <b>will not be extended.</b> Nevada Revised Statute (NRS) <b>612.475</b> (3) states, "Upon receipt of a notice of the filing of a claim, the employing unit shall, within 11 calendar days after the date of mailing of the notice, submit to the Division all known relevant facts which may affect the claimant's rights to benefits." NRS <b>612.551</b> (7) states, "If an employer who is given notice of a claim for benefits pursuant to subsection 1 fails to submit timely to the Division all known relevant facts which may affect the claimant's rights to benefits as required by NRS 612.475, the employer's record for experience rating is not entitled to be relieved of the amount of any benefits paid to the claimant as a result of such failure that were charged against the employer's record pursuant to NRS 612.550 or 612.553."	
If emails are misdirected because you failed to notify the Division of a change in your email address or if you forgot or misplaced your SIDES E-Response Personal Identification Number (PIN) and this results in your late responses, you will lose your right to appeal.	
If you forget or misplace your PIN, please contact the SIDES Help Desk at (775) 684-3801. If you need to change your email address, please email UISupport@detr.nv.gov, or fax to (775) 684-3873.	
☐ I Accept (The "I Accept" box must be checked to register for SIDES E-Response.)	
Authorized Representative's Name (Print or Type)	Title
Authorized Representative's Signature	Date
Return the completed, signed registration for SIDES E-Response to:	

**EMAIL:** 

<u>UISupport@detr.nv.gov</u> (Scan signed form and send it as a PDF file attachment to the email.) **FAX:** 

(775) 684-3873

Mail: Employment Security Division Attn:UISS

500 E. Third St. Carson City, NV 89713