

Instructions for Preparing Form ETA 83, Weekly Request For Assistance

The Form ETA 83 will be completed by an applicant for each week that he/she requests a payment of DUA benefits. In addition to the normal identifying information contained in the heading of the form, space is provided to enter the disaster number, local office number and the beginning and ending date of the week being claimed.

- Applicant Request. The applicant must check the appropriate box “Yes” or “No” to questions regarding availability, other forms of compensation, performance of work during the week, and income. Self-employed individuals must also answer items in the grid below Question 6 regarding hours engaged in their business.
- Applicant Certification. After furnishing all required information, the applicant will read the certification, sign in the appropriate space and enter the date in the space provided.
- Agency Review. A DES representative will review this form. Any “Yes” or “No” answers in the request that raise a potential issue must be explained. If taken in-person, any answers that are changed must be initialed by the claimant and the interviewer. Fact Findings will be conducted as needed and forwarded with Form ETA 83 to the Special Programs Unit for processing.
- Agency Determination. After review, a member of the Special Programs Unit will enter the amount of DUA authorized for payment. Likewise, if no payment is to be authorized for the week, a notice of denial will be issued. Date of the determination is entered on the form.

The Form ETA 83, Weekly Request For Assistance, should be either mailed or faxed as shown below.

Mail to:
NC Dept. of Commerce
Division of Employment Security
Attention: Special Programs Unit/DUA
P.O. Box 25903
Raleigh, NC 27611-5903

OR, Faxed to:

919-715-8423