



North Carolina Department of Commerce  
Division of Employment Security  
Unemployment Insurance



**REQUEST FOR SEPARATION INFORMATION FROM EMPLOYER**

<SCUBI WILL NEED TO INSERT A MAIL DATE HERE> *(We want the date written out, example, April 7, 2016.)*

**Employer name**

**Address1**

**Address 2**

**City St Zip (Window envelope)**

Employer Account Number (EAN):

The individual named below filed a claim for unemployment insurance benefits and listed you as the last employer. As the last employer, the Division of Employment Security requests that you provide timely separation information. This information will be considered when determining the individual's eligibility for benefits if received by the due date indicated below.

In order to respond, you must log into your employer portal at [des.nc.gov](http://des.nc.gov). If you need any assistance logging into your portal or other questions regarding this request, you may contact the Employer Call Center at 919.707.1150 or at 1.866.278.3822.

**Failure to provide a timely and adequate response or failure to participate in any appeals hearing related to this claim may result in an increase in your tax rate.**

Claimant Name:

Social Security Number:

Effective Date of Claim:

Response Due Date:

If the claimant is filing an initial claim and you are also a base period employer, you will receive, under separate mailing, Form NCCLM 551L Notice of Unemployment Claim, Wages Reported, and Potential Charges.

**Help us prevent UI Fraud!**  
Report Suspected UI Fraud Online at  
[des.nc.gov](http://des.nc.gov)  
Post Office Box 25903 Raleigh, North Carolina 27611-5903