



**Connecticut Department of Labor**

Unemployment Division  
200 Folly Brook Blvd  
Wethersfield, CT 06109

**State Information Data Exchange System**

E-Response Registration

Complete this form to receive and respond to Separation Verification (form UC-61A) or Notice to Employer of Hearing (form IS-790E) electronically\* rather than by U. S. Postal Service mail when someone you employed files a claim for Connecticut unemployment insurance benefits and the reason for separation must be confirmed or a separation hearing was scheduled.

Business Name	
Mailing address where you currently receive unemployment benefit claim notices (No., Street, P.O. Box, City, State, Zip)	
Federal Employer Identification Number (FEIN)	Connecticut Department of Labor Employer Registration Number
Contact Person's Name	Contact person's Telephone Number
Email address to receive notifications of notices that are ready to be viewed on the SIDES E-Response website	

By checking "I Accept" below, you agree to the following:

- 1) Your business will no longer receive paper forms UC-61A Separation Verification.
- 2) Your business will no longer receive paper forms IS-790E Notice to Employer of Hearing by mail, \*except when the hearing was scheduled outside of the initial claims process.
- 3) The CT Department of Labor (CTDOL) will transmit a notice to the email address provided above (or a new email address supplied to the department in accordance with paragraph 6) whenever a SIDES Request for Separation Information is ready for you to view and respond to electronically via the SIDES E-Response website.
- 4) You must take the necessary steps to insure that emails from **DOL.CTIDES@ct.gov** and **DOL.CTIDESAdmin.ct.gov** are delivered to you and not blocked by your email provider's filters or your computer filters.
- 5) A personal identification number (PIN) is included in each SIDES notification email. If you forget or misplace your PIN, you must immediately contact the CT SIDES Help desk at **DOL.CTIDESAdmin@ct.gov** or 860-263-6779 to obtain a PIN.
- 6) If your email address or contact information changes from the address you provided above, you must immediately submit an updated E-Response Registration form (this form) to the CT SIDES Help Desk.
- 7) In order to be considered timely, a response to a Separation Verification SIDES Request is due within seven (7) calendar days of the request being sent, and a response to a Hearing Notice SIDES Request is due within ten (10) calendar days of the request being sent. The due date of your response **will not be extended** if the email notice was undeliverable due to your failure to comply with paragraphs 4 or 6 or you were unable to respond due to your failure to comply with paragraph 5.

**I ACCEPT** (This box must be checked or your application to register for SIDES E-Response will not be approved.)

Authorized Representative's Name

Title

Authorized Representative's Signature

Date

**RETURN YOUR COMPLETED, SIGNED APPLICATION TO CTDOL BY ONE OF THE METHODS BELOW:**

**US POSTAL SERVICE:**

CT SIDES REGISTRATION

Connecticut Department of Labor

UI Technical Services

200 Folly Brook Blvd.

Wethersfield, CT 06109

**OR**

**FAX:**

860-263-6771