INSTRUCTIONS FOR THIRD PARTY ADMINISTRATORS/CPAS TO

REQUEST RATES AND ACCOUNT NUMBERS FOR CLIENTS

Save money and time by submitting your requests electronically.

Please submit a quarterly request for rates and amounts for your clients.

Employer Services works with third parties, accountants and CPAs with 10 or more clients to request one electronic rate file for all their clients. We encourage you to request your clients' rates and amounts due at least once a quarter to keep your files updated.

COLORADO
Department of
Labor and Employment

Instructions

1. Employer representatives should submit a text file attachment in the format shown in the chart below.

2. Employer ID or account numbers have 9 digits in this format 123456.78-9.
   a. Submit the ID with the first 6 digits, then the 9th digit and then the 7th and 8th digit. (Most accounts have zeros for the 7th and 8th digits 123456.00-9.)
   b. Correct format: 123456900

3. Please note that employer names are optional and not needed.

4. Supply a contact name, phone number and email address so that we may reach you if necessary.

5. Send the text file:
   a. via email to: bonnie.smith@state.co.us OR
   b. Through FEDEX or UPS with return payment sticker filled out to send the information back.

6. Employer Services will send back the report via email OR FEDEX / UPS as requested.

7. The report you receive back will include:
   a. employer name
   b. account number
   c. balance - potential credit or debit or zero
   d. number of missing reports
   e. rate

8. Requests can be sent in at any time; they will be completed and returned to you within 3 business days. By request only.

9. Final quarterly balancing on accounts are done at the end of February, May, August and November.

You must send a request using this text file format:

Field Name	Beginning Column	Ending Column	Description
Employer ID	1	9	Leading zeroes are required.
			First 6 digits/check digit/distribution point. Example: Employer 001234/9/00 This MUST BE CODED 001234900 not 001234009 nor 001234.00-9
Filler	10	22	MUST BE BLANK
Employer Name	23	57	This name is optional, as the program captures the Employer Name from the QU-EP File