

Electronic Payment Requirement Waiver Request for Payment of Pennsylvania Unemployment Compensation Tax Liabilities

This form must be submitted if you are currently unable to comply with the electronic payment requirement and are requesting a temporary waiver allowing you to submit your Unemployment Compensation tax payment via check or money order.

NOTE: This request only applies to the employers required by Pennsylvania Regulations to electronically submit payment.

Please complete all of the following information to receive consideration for this waiver:

PA UC Account Number _____ Employer Name _____

Employer Address _____

What technological or other barriers prohibit your compliance with this requirement?

What steps are you taking to remove those barriers?

Date when you will submit your payment electronically _____

Name, title, telephone number and email address of a contact person if the department requires additional information:

Name _____ Title _____

Telephone Number (____) _____ Email address: _____

Signature and title of person completing this request:

Signature _____ Title _____

Date _____

Return this completed form to:
Office of UC Tax Services
PO Box 68568
Harrisburg PA 17106-8568