

INSTRUCTIONS FOR REGISTRATION FORM FOR COMMERCIAL EMPLOYERS

An employer is required by law to file a registration form with the Employment Development Department (EDD) within **fifteen (15) calendar days** after paying over \$100 in wages for employment in a calendar quarter, or whenever a change in ownership occurs. Please complete all items on the front this DE 1 and send to the address shown on the front of this form.

- A. BUSINESS NAME** - Give the name by which your business is known to the public. Enter "None" if no business name is used. Enter the date the new ownership began operating. Enter Federal Employer Identification Number(s). If not assigned, enter "Applied For."
- B. OWNER, CORPORATION, LIMITED LIABILITY COMPANY (LLC) OR LIMITED LIABILITY PARTNERSHIP (LLP) NAME** - Enter the full given name, middle initial, surname, title, social security account number, and driver's license number for each individual, partner, corporate officer, LLC member/officer/manager. For a corporation, LLC or LLP, enter the name exactly as spelled and registered with the Secretary of State. Include the California corporate, LLC or LLP identification number.
- C. BUSINESS LOCATION** - Enter the California address and county where the business shown in item A is physically conducted. If more than one California location, list on a separate sheet and attach to this form. Enter the mailing address where EDD correspondence and forms should be sent. If this address is the same as the business location, enter "Same." Provide daytime business phone number, FAX number, E-MAIL address, city business license number and total number of employees for the ownership shown in Item B.
- D. PRIOR REGISTRATION** - If any part of the ownership shown in item B is operating or has ever operated at another location, check "Yes" and provide account number, business name, or address.
- E. WAGES** - Check the box for the quarter in which you first paid over \$100 in wages in a calendar quarter.
- F. PIT WITHHOLDING** - Check appropriate box. If you are not sure if you are subject to federal monthly/semi-weekly Personal Income Tax deposits, contact an Employment Tax Customer Service Representative at 1-888-745-3886.
- G. ORGANIZATION TYPE** - Check the box that best describes the legal form of the ownership shown in item B. Corporations also identify "For Profit" or "Nonprofit 501 (c) (3).
- H. EMPLOYER TYPE** - Check the box that best describes your employer type. If box (21) Public Entity is checked, use DE 1GS to register. If box (03) Nonprofit 501 (c) is checked, use DE 1NP to register. You may call to have either forms faxed to you.
- I. BUSINESS TYPE** - Check the box that best describes your business type. Describe the particular product or service rendered in detail. This information is used to assign an Industrial Classification Code to your business. The codes allows EDD to report important trends in California's economy.
- J. CONTACT PERSON** - Enter the name title and phone number of the person authorized by the ownership shown in item B to provide EDD staff information needed to maintain the accuracy of your employer account.
- K. STATUS OF BUSINESS** - Check the box that best describes why you are completing this form. If the business was previously owned, provide owner and business name, purchase price, date ownership was transferred to this ownership and EDD account number.
- L. DECLARATION** - This declaration should be signed by one of the names shown in item B.

NEED MORE HELP OR INFORMATION? Call Account Services Group (ASG) in Sacramento at (916) 654-7041 with questions regarding this form or the registration and account number assignment process. If you have questions about whether your business entity is subject to reporting and paying state payroll taxes, contact the nearest Employment Tax Customer Service Office (ETCSO) listed in your local telephone directory under State Government, Employment Development Department or call an Employment Tax Customer Service Representative at 1-888-745-3886. For TTY (nonverbal) access, call 1-800-547-9565.

Three options for obtaining a new employer account number are available: by mail, by calling (916) 654-8706 to obtain your account number over the phone or by fax service at (916) 654-9211. All three options require that a registration form be completed and faxed or mailed to: Employment Development Department, Account Services Group MIC 28, PO Box 826880, Sacramento, CA 94280-0001.

We will **notify** you of your **EDD Account Number** by mail. To help you understand your tax withholding and filing responsibilities, you will be sent a **California Employer's Guide, DE 44**. Please keep your account status current by notifying ASG of all future changes to the original registration information.

I dreamt the government was here to help...

- *Understand who, what, how, and when to report state employment taxes.*
- *Avoid common pitfalls and costly mistakes.*
- *Control unemployment insurance costs.*
- *Learn the differences between independent contractors and employees.*
- *Discover services and resources, available at no additional cost.*

Make this dream a reality. Attend an Employment Tax seminar designed especially for employers, sponsored by the Employment Development Department. Please complete and mail the bottom portion of this form to the Employment Development Department, P.O. Box 2068, Rancho Cordova, CA 95741-2068 or fax to (916) 464-3504. We will contact you regarding the date, time, and location of the next seminar.

If you would like more information, please call (916) 464-3502 or visit EDD's Web site at www.edd.ca.gov.



Name: _____

Address: _____

Street

City

State

ZIP Code

Telephone: () _____ FAX () _____

Preferred time and place to attend a seminar:

Day of week: Mon Tue Wed Thu Fri Sat (circle one)

Time of day: Morning Afternoon Evening (circle one)

Preferred city or area: _____

The dream is real.



EDD is an equal opportunity employer/program. Special requests for accommodation need to be made two weeks prior to the event by calling the above information number.