

NOTICE THAT EMPLOYMENT OR BUSINESS HAS BEEN DISCONTINUED

(STATUS CHANGE)

Mail To:
Cashier - Texas Workforce Commission
P.O. Box 149037
Austin, TX 78714-9037
512.463.2731
www.texasworkforce.org

EMPLOYER ACCOUNT NUMBER: _____

NOTICE IS HEREBY GIVEN to the Texas Workforce Commission that the employer named in Item No. 1 below has suspended or discontinued employment in Texas; and that the employer will not file quarterly contribution and wage reports for periods after the date shown in Item No. 4 below, if applicable, until such time in the future as the employer again has one or more persons in employment under the Texas Unemployment Compensation Act.

1. EMPLOYER NAME: _____
2. PRESENT MAILING ADDRESS: _____
3. Last date on which any person performed employment for this employer: _____
4. Date of payment of final wages for any employment through the date shown in Item 3: _____
5. REASON FOR DISCONTINUATION OF EMPLOYMENT:
 Business in Texas suspended or discontinued entirely, without a successor..... DATE: _____
 Business in Texas continued in operation without employment after the date shown in Item 3 DATE: _____
 Business in Texas acquired by a successor..... DATE: _____
6. NAME AND ADDRESS OF THE SUCCESSOR: _____

7. Did the successor acquire **all** of your assets or business in Texas? YES NO If the answer is "NO" explain what part of your assets or business the successor acquired and what part you retained. _____

AUTHORIZED CHANGES <small>(for TWC use only)</small>	FOR EMPLOYER
<p>1 _____</p> <p>2 _____</p> <p>3 _____</p> <p>4 _____</p> <p>5 _____</p> <p>6 _____</p> <p>(New) County Code _____ Tax Area _____</p> <p>-----</p> <p>Authority: _____</p> <p>FROM: ACCTS. EXAMINER _____</p> <p>TAX AREA _____ DATE _____</p>	<p style="text-align: center;">IMPORTANT WARNING:</p> <p>The filing of this notice does not have the effect of changing the employer's status as a subject "employer" under Chapter 201, Subchapter C of the Texas Unemployment Compensation Act and does not terminate liability. After filing this notice, the employer will continue to be liable for the payment of contributions on wages paid for any employment that the employer may have in the future regardless of the number of employees. This notice will relieve the employer of only the duty of filing quarterly contributions and wage reports for periods during which no employment is performed. The employer's liable status as a subject "employer" may be terminated only as of the beginning of a calendar year and only in accordance with the provisions of Section 206.004 of the Act which is quoted on the back side of this form.</p> <p>SIGNATURE: _____</p> <p>TITLE: _____</p> <p>DATE: _____</p>

TEXAS UNEMPLOYMENT COMPENSATION ACT

Sec. 206.004. Termination of Coverage.

- (a) An employing unit may cease to be an employer only on January 1 of a year and only if the commission finds that:
 - (1) the employing unit was not an employer during the preceding year; or
 - (2) the employing unit had not had any individuals in employment during the preceding three calendar years.
- (b) The commission may not make a finding under Subsection (a)(1) unless the employing unit files an application for termination of coverage with the commission on or after January 1 but before April 1 for which termination is requested. The commission may make a finding under Subsection (a)(2) without an application having been filed.

Sec. 206.005. Previous Rights Lost by Cessation of Coverage.

When an employing unit that ceased to be an employer subsequently becomes an employer, the employing unit is considered to be a new employer without regard to the rights that employing unit acquired when previously an employer.

Individuals may receive, review and correct information that TWC collects about the individual by emailing to open.records@twc.state.tx.us or writing to TWC Open Records, 101 E. 15th St., Rm. 266, Austin, TX 78778-0001.