



☎ (845) 634-4620 | 🖨 (845) 634-4670 | ✉ help@industrialui.com

Location Contact Update Form

Please use this form to provide changes or updates to your location's contact for unemployment insurance documentation.

Location Name:

SUTA Number:

Entity ID:

Name:

Phone:

Email Address:

Manager

Claim Contact

Backup Claim Contact

Hearing Contact

Backup Hearing Contact

Name:

Phone:

Email Address:

Manager

Claim Contact

Backup Claim Contact

Hearing Contact

Backup Hearing Contact

Name:

Phone:

Email Address:

Manager

Claim Contact

Backup Claim Contact

Hearing Contact

Backup Hearing Contact