

COMMONWEALTH of VIRGINIA

Virginia Employment Commission

Employer Quarterly Tax and Payroll Report Electronic Filing Waiver Request

Complete this form to request a temporary waiver if you are unable to submit your Quarterly Unemployment Tax Reports electronically or need more time to do so. Provide all information requested below.

Business Informa Request Date:		Business Name:			
Doing Business As					
First and Last Name of Owner or Responsible Party:					
Number of Employees:					
VEC Account Number (10 digits):					
FEIN (9 digits):					
Physical Address:					
	City:			St:	Zip:
Mailing Address:					
	City:			St:	Zip:
Contact Name:				Phone Number:	
Reason for Waiver					
Check the reason a waiver is being requested and provide all information requested.					
□ No Computer					
□ No Internet Access Available in Area					
☐ Other – State the specific reason.					
Fax to: (804) 786-	8138	OR		Virginia Employme Waiver Requests	nt Commission

All waivers are temporary and must be renewed annually prior to the First Quarter Due Date (4/30)

P.O. Box 26441

Richmond, VA 23261-6441