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| --- | --- |
| UC-201-B-S Rev. 9-93 |  **TRANSFER OF BUSINESS** |
|  |

Supplement to Employer’s Initial Statement

 WORKFORCE WEST VIRGINIA

**UNEMPLOYMENT COMPENSATION DIVISION**

112 California Avenue

## Charleston, West Virginia 25305

# STATEMENT BY SUCCESSOR EMPLOYER

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Name of **Predecessor** |       |  Account No. |       |

|  |  |
| --- | --- |
|  Trade Name, If Any |       |
|  Address of Operation |       |
|  Present Address of **Predecessor** |       |
|  |  |
| 2. On What Date Did You Acquire the Business? |       |
|  |
|  3. Did You Acquire **All** of the Predecessor’s Business in West Virginia, or Only Part? | [ ]  |  All | [ ]  |  Part |
|  If You Acquired Only Part, (a) What Part of the Business Did You Acquire?  |       |
|  (b) What Percentage of the Business Did You Acquire?  |       |
|  |
| 4. Have You Continued the Business of Your Predecessor Without Interruption?      |
|  | [ ]  |  Yes | [ ]  |  No If “No” ---      |
|  Did You **Resume** the Business of Your Predecessor After Interruption?  | [ ]  |  Yes | [ ]  |  No |
|  Do You **Plan** To Resume the Business of Your Predecessor? | [ ]  |  Yes | [ ]  |  No |
|  If “Yes,” When Do You Expect To Resume the Business? |       |
|  |
|  5. Did You Continue or Resume, or Do You Plan To Resume, the **Same** Business As That of Your |
|  Predecessor?  | [ ]  |  Yes | [ ]  |  No  |
|  If “No,” Explain: |       |
|  |  |
|  |  |
|  6. If You Continued or Resumed the Business, Do You Employ Substantially the Same Employees as |
|  Those Your Predecessor Employed in Connection with the Assets Transferred? | [ ]  |  Yes | [ ]  |  No |
|  |  |
|  7. **CERTIFICATION:** |  |
|   |  |  |  |
|  Name of Successor: |       | Date: |       |
|  Signature: |  | Title: |       |
|  |  |  |
|  |
|  | **STATEMENT OF PREDECESSOR** |  |
|  8. I Hereby Certify That All Information on Succession Furnished by the Successor Is True and That It  Is In Accordance With the Terms of Transfer.  |
|  Name of Predecessor: |       | Date: |       |
|  Signature: |  | Title: |       |
|  |