WVUC-A-157

Revised 9-1-63

WORKFORCE WEST VIRGINIA

UNEMPLOYMENT COMPENSATION DIVISION

Charleston

APPLICATION FOR ESTABLISHMENT OF A JOINT ACCOUNT

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1. (a) Applicant (b) West Virginia

Employer’s Name     Acct. No

(c) Type of Organization: Corporation ; Partnership ; Individual Ownership \_;

Other . Describe

(d) Address            

Street City State

The above employer hereby makes application for the establishment of a joint account, or for the merger of this existing account into a joint account heretofore established, as provided in Section 7, Article 5, Chapter 21-A, Code of West Virginia, and Regulation XXI of the Commissioner of Employment Security. This account is to be composed of the accounts of the applicant employer and other employers as shown in Item 2 below.

2. Give name, address, and account number of the other employers in this joint account:

Name Address Account Number

     

           

           

           

           

           

3. Effective date desired for the joint account

I affirm that I am authorized to execute this application for participation in this joint account.

            

Date Employer Name

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Signed Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Approved Commissioner