



**Instructions for Small Employer Exception (SEE) Submittal Certification**

The certification document is required for any new SEE request. This certification should be completed by the employer and contain signatures both from the employer and the submitter.

**Note:** The signature cannot be dated more than one calendar year prior to the date of the exception request. This document must accompany each new SEE request, and all information is required. This document is not needed when requesting an update or delete of an existing previously approved SEE.

<b>Field:</b>	<b>Description:</b>
Employer Name	Printed name of employer certifying less than 20 employees
Employer Address	Printed address of employer certifying less than 20 employees
Number of Employees Statement	Number of employees employed by the certifying employer
Employer Identification Number (EIN)	EIN *Required if no TIN
Tax Identification Number (TIN)	TIN of employer *Required if no EIN
Employer Representative Name	Printed name of Employer Representative
Signature of Employer Representative	Signature of the Employer Representative
Date	Date of the Employer Representative Signature
Submitter's Representative Name	Printed name of Submitter's Representative
Signature of Submitter's Representative	Signature of the Submitter's Representative
Date	Date of the Submitter's Representative Signature



**Small Employer Exception Submittal Certification**

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

\_\_\_\_\_

Employee Name: \_\_\_\_\_

Employee Date of Birth: \_\_\_\_\_

**We certify that we have not had 20 or more employees on each working day in 20 or more calendar weeks in the current or preceding calendar year.**

We employ \_\_\_\_\_ employees.

Employer Identification Number (EIN): \_\_\_\_\_

Employer Tax Identification Number (TIN): \_\_\_\_\_

\_\_\_\_\_  
Employer Representative Name

\_\_\_\_\_  
Signature of Employer Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Submitter's Representative Name

\_\_\_\_\_  
Signature of Submitter's Representative

\_\_\_\_\_  
Date