UI-19D

UNEMPLOYMENT INSURANCE ACT 63 OF 2001

Information about employee

FAX NO (012) 337-1943/1944/1580/1581/1582

Information to be supplied in terms of Section 56(1&3) read with Regulation 13(1&2)

An employer must before the seventh day of each month inform the Commissioner of any changes arising during the previous month regarding the employer's contact details or employees remuneration details including new appointments and termination of service. The employer must forward this form to the UIF, PRETORIA, 0052 or alternatively fax form to any of the above numbers.

1. **EMPLOYER DETAILS**

1.1 UIF Employer Reference No _____ 1.2 Name of Employer _____

1.3 Physical address _____ 1.4 Postal address _____

_____ _____

1.5 Phone No _____ 1.6 Fax No _____ 1.7 E-mail address _____

2. **EMPLOYEE DETAILS**

A Surname	B Initials	C ID Number (13 Digit bar-coded RSA ID No.)	D Remuneration[1]		E Frequency Paid[2] PM/PW/PD	F Actual Hours Worked[3]	G Frequency Worked[4]	H Commencement date as a contributor						I Termination Date						J Reason for Termination
			R	c				D	D	M	M	Y	Y	D	D	M	M	Y	Y	

I, _____ (Name of Employer), Identity no _____, declare that the above information is true and correct. I understand that it is an offence to make a false statement.

EMPLOYER SIGNATURE _____ **DATE** _____

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[1] **Remuneration** means actual basic salary plus payment in kind **(Declare actual gross salary)**

[2] **Frequency Paid ie**. M=Monthly, W=Weekly, D=Daily, H=Hourly and F=Fortnightly

[3] **Actual Hours Worked ie.** Actual hours worked per day/week/month

[4] **Frequency Worked ie.** M=Monthly, W=Weekly, D=Daily, H=Hourly and F=Fortnightly

[5] Employers may also submit these details electronically from their payrolls or on the UIF's Website at www.labour.gov.za – Telephone no (012) 337-1700/1.