

State of Tennessee
Department of Human Services
Tennessee New Hire Reporting Program
PO Box 17367
Nashville, TN 37217

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REMINDER EMPLOYERS: MANDATORY LAW
TENNESSEE NEW HIRE REPORTING PROGRAM

January 2007 UPDATED EMPLOYER GUIDE



ON BEHALF OF THE CHILDREN OF
TENNESSEE –THANK YOU!

Tennessee State Directory of New Hires
www.TNnewhire.com

As of January 16, 2007, New Mailing Address
Tennessee New Hire Reporting
PO Box 17367
Nashville, TN 37217

❖ *New Hire information is important to the State*

New Hire information is important to the State because it matches the new hire information to the child support obligation databases and issues a new wage assignment to the employer.

Prompt reporting of New Hire information helps to detect and prevent public assistance, food stamps and unemployment and workers' compensation fraud by matching the new hire information to these databases.

Tennessee New Hire Reporting Program

Federal and State law requires all employers doing business in the State of Tennessee to report all newly hired or rehired employees to the Tennessee New Hire Reporting Program. Prompt reporting of new hires improves child support collections and reduces public assistance costs.

Submitting quarterly wage reports to the Tennessee Employment Security Commission does not satisfy the obligation to submit timely new hire reports.

Easiest and Fastest Way to Report

The Tennessee New Hire Reporting Program has established a secure internet site for employers to report new hires. Visit us at: www.TNnewhire.com

This site offers on-line employer registration, on-line data entry, and a file transfer system that eliminates the need to send us faxed or mailed forms, lists, magnetic tapes, cartridges and diskettes.

Mailing Address

Tennessee New Hire Reporting Program
PO Box 17367
Nashville, Tennessee 37217
(for diskettes, tapes, cartridges, W-4's, forms, or reports)

Telephone Number

To speak with a customer service specialist or to receive technical assistance, contact us at: 1-888-715-2280 or email us at support@TNnewhire.com

Fax Number

1-877-505-4761
(for W-4's, forms, or reports)

Who must report and how to report?

Any employer doing business in the State of Tennessee who hires or rehires an employee on or after October 1, 1997.

Mandatory Information

- Employer Name
- Employer Address (physical work-site address)
- Employer FEIN
- Employee Name
- Employee Home Address
- Employee SSN
- Date of Hire

Additional Information

- Date of Birth
- State of Hire
- Gender
- Earned Income Tax Credit Available
- Employee Left Employment
- Availability of Health Insurance
- Payroll Address (if different than physical address)

Create the Report

To create a report, you can use:

- Internet reporting at www.TNnewhire.com
- Electronic reports via magnetic tape or cartridge
- Fax the report to 1-877-505-4761 (W-4's, form, or reports)
- Mail (diskettes, tapes, cartridges, W-4's, form, or reports)
- Telephone: 1-888-715-2280

When to Send Reports

Reporting deadlines depend on the method of transmission.

- Manual Reports (mail, fax, or phone) must be sent within 20 days from the date of hire or rehire.
- Electronic Reports must be sent every 2 weeks, but no later than 16 days from the date of hire or rehire.

Penalties

Failure to comply with the New Hire Law could result in a \$20.00 fine per incident for failure to report, or up to a \$400.00 fine if conspiracy to avoid reporting is determined.

Employers with Employees in Multiple States

You have two reporting options:

1. Report employees in each state that you do business, or
2. Select one state to report all new hires from all states.

Please call the Tennessee Customer Service line for details on registration if you wish to report all employees to Tennessee.

STATE OF TENNESSEE NEW HIRE REPORTING

Effective October 1, 1997, all Tennessee employers are required to report certain information about employees who have been newly hired, rehired, or have returned to work. Employers must either (1) complete this form, or (2) submit a copy of the employee's IRS W-4 form, (3) other form with required information at a minimum, or (4) submit the information by Internet, magnetic tape or diskette. This form may be reproduced as necessary. **Reports made on this form must be within 20 calendar days of hire or if you wish to help the Department of Labor and Workforce Development, within 5 days of date of hire.**

TO ENSURE ACCURACY, PLEASE PRINT (or TYPE) NEATLY IN UPPER-CASE
LETTERS AND NUMBERS, USING A DARK, BALL-POINT PEN

REQUIRED INFORMATION:	EMPLOYEE DATA
Social Security Number: - 	
Name: 	
Last 	
Home Address: 	
(Do not use Employer Address, Do not leave blank) 	
City State Zip Code - 	
Employee Date of Hire: - 	
Federal EIN: - 	
Employer Name: 	
Address: 	
	
City State Zip Code - 	

ADDITIONAL INFORMATION:

Store or Outlet Number: 		
Gender (M/F): 	Employee State of Hire: 	Date of Birth: -
Earned Income Tax Credit Available? (Y/N): 	Employee Left Your Employment? (Y/N): 	
(if unknown, leave blank)		
Does your company offer Medical Insurance? (Y/N): 		
(Has this employee left your employment before you filed this report?)		
Corporate or Payroll Address: 		
(if different from business address)		
		
City State Zip Code - 		

REPORTS WILL NOT BE PROCESSED WITHOUT MANDATORY INFORMATION

Send Reports To:

Tennessee New Hire Reporting Program
P.O. Box 17367
Nashville, Tennessee 37217
Fax: (877) 505-4761

ELECTRONIC REPORTING SPECIFICATIONS

This attachment presents the submission requirements for those employers who wish to report new hires electronically. Employers who have any questions about reporting electronically should contact Technical Support Staff at New Hire Operations Center at (888) 715-2280.

3 ½” Diskette: The diskettes must conform to the format specifications listed in the Data Record Layout below. The diskettes must be non-compressed and in ASCII fixed length format. Do not enclose fields in quotes or use comma delimiters. An external label must be affixed to the diskette indicating the employer’s name, federal EIN, contact name and phone.

Magnetic Tape: The tape must conform to the specifications listed in the Data Record layout below and the following Header requirements. Magnetic tapes must be 9 track, 1,600 or 6250 bpi, IBM Standard label, EBCDIC. Block size must be 9,000. Acceptable media are Reel tapes or 3480/3490 cartridges. An external label indicating the employer’s name, contact name, and phone is required.

Data Record Layout (Magnetic Tape and 3 ½” diskette)

Logical Record Length = 450

Field Name	Type	Length	Start Pos	End Pos	Opt'l/Req'd	Format/Default Values
Employee's First Name*	Character	16	1	16	Required	
Employee's Middle Initial	Character	1	17	17	Optional	
Employee's Last Name*	Character	25	18	42	Required	Allow a hyphen
Employee's Street Address Line 1*	Character	35	43	77	Required	
Employee's Street Address Line 2	Character	35	78	112	Optional	
Employee's City*	Character	20	113	132	Required	
Employee's State*	Character	2	133	134	Required	Valid 2 letter FIPS abbr. (e.g. TN)
Employee's Zip*	Number	5	135	139	Required	All zeros will be rejected
Employee's Zip +4	Number	4	140	143	Optional	
Employee's Social Security Number*	Number	9	144	152	Required	No hyphens
Employer's Name*	Character	40	153	192	Required	
Employer's Street Address Line 1*	Character	35	193	227	Required	
Employer's Street Address Line 2	Character	35	228	262	Optional	
Employer's City*	Character	20	263	282	Required	
Employer's State*	Character	2	283	284	Required	Valid 2 letter FIPS abbr. (e.g. TN)
Employer's Zip*	Number	5	285	289	Required	All zeros will be rejected
Employer's Zip +4	Number	4	290	293	Optional	
Employer's FEIN*	Number	9	294	302	Required	No hyphens
Employer's Payroll Address 1	Character	35	303	337	Optional	Address where employee's check is processed
Employer's Payroll Address 2	Character	35	338	372	Optional	
Employer's Payroll City	Character	20	373	392	Optional	
Employer's Payroll State	Character	2	393	394	Optional	
Employer's Payroll Zip Code	Number	5	395	399	Optional	
Employee's Hire Date*	Number	8	400	407	Required	CCYYMMDD
Left Your Employment During Period	Character	1	408	408	Optional	Y=Yes, N=No
Employee's Birth Date	Number	8	409	416	Optional	CCYYMMDD
Employee's Gender	Character	1	417	417	Optional	
Employee's Work State	Character	2	418	419	Optional	Valid 2 letter FIPS abbr. (e.g. TN)
Earned Income Tax Credit Indicator	Character	1	420	420	Optional	Y=Yes, N=No
Medical Insurance Available	Character	1	421	421	Optional	Y=Yes, N=No
Outlet or Store Number	Character	29	422	450	Optional	

*Field Names in bold denote required fields.

Note: All fields are in upper case alphanumeric format – left justified with trailing spaces. Missing non-required fields should contain all spaces.