

# OTHER SERVICES

## Online Program User Guide

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## Introduction

The law allows employers to update Employer Address Information for Notice of Unemployment Insurance Applications and Notice of Potential Chargeback notices. An employer can designate the preferred mailing address for all future unemployment and chargeback correspondence.

Employers can view, respond to, and submit responses to Maximum Potential Chargeback Notices by logging in to EBS and clicking on the **Other Services Information** tab where they will have the option to select Designated Address or Maximum Potential Chargeback Notice.

## Note

To access **Other Services**, employers must sign up for an Employer Benefits Services (EBS) account. To learn more about Employer Benefits Services and to learn how to sign up for an Employer Benefits Services account, see the EBS Administrator Duties user guide.

## Employer Designated Address

To access **Other Services**, select the **Other Services** tab on the **My Home** page.

Before beginning, read about Designated Address and Maximum Potential Chargeback Notice in the Other Services Information section.

To edit the designated address, select **Designated Address** from **Quick Links**.

The program proceeds to a page that allows the user to either create a designated address or chargeback designated address. Each address type must be created or edited one at a time.

The screenshot shows the 'Employer Benefit Services' web application. At the top, there is a navigation bar with 'Home', 'My Profile', and 'Logout' links. Below this is a header for 'Employer Benefit Services' and a menu with tabs: 'My Home', 'Inbox', 'Appeals', 'User Admin', 'UI Tax Services', 'Work in Texas', 'Mass Claims', 'Shared Work', and 'Other Services'. The 'Other Services' tab is selected. On the left, a 'Quick Links' sidebar contains 'Other Services Information', 'Designated Address', and 'Maximum Potential Chargeback Notice'. The main content area is titled 'Other Services Information' and includes a 'User Information' section with fields for Name, Email Address (with an 'Update E-mail Address' link), and Employer. Below this is another 'Other Services Information' section with sub-sections for 'Designated Address' and 'Maximum Potential Chargeback Notice'. The 'Designated Address' section explains that employers can elect to receive correspondence electronically or by mail and provides a link to <https://twc.texas.gov/businesses/designate-employer-mailing-address>. The 'Maximum Potential Chargeback Notice' section explains that these are amounts of paid unemployment benefits charged to an employer's tax account and provides a link to <https://twc.texas.gov/businesses/employer-unemployment-benefit-chargebacks>.

## Edit Information

Complete all required and relevant fields in the **Employer Information** section.

TIP: It is a good idea to complete all important and relevant fields even if they are not required.

Select **Next**.

The screenshot shows the 'Employer Designated Address: Edit Information' page. The page header includes the Texas Workforce Commission logo and 'Employer Benefit Services'. A 'Progress' sidebar on the left lists: 'Edit Designated Address' (selected), 'Address Verification', 'Review and Submit', and 'Confirmation'. The main content area is divided into sections: 'User Information' (Name, Email Address, Employer, User ID, and a link to 'Update E-mail Address'), 'Address Type' (DESIGNATED ADDRESS), 'Employer Information' (TWC Tax Account Number, Employer, Additional Name (DBA), Care of, Attention, Mailing Address, City, State, and Zip Code), 'Designated Address Contact Information' (First Name, Middle Initial, Last Name, Title, Phone Number, Fax Number, and Email Address), and 'Last Submitter Information' (Name and Last Changed date: August 22, 2019 12:20 AM CT). Red asterisks indicate required fields. 'Next' and 'Previous' buttons are at the bottom.

## Verification

Check that the address is correct. If the address is not correct, select **Previous** to return to the **Edit Information** page and make corrections. If the address is correct, select **Next**.

TIP: It is a good idea to use the US Postal Service standardized address.

The screenshot shows the 'Employer Designated Address: Verification' page. The page header is the same as the previous page. The 'Progress' sidebar now highlights 'Address Verification'. The main content area includes: 'User Information' (same as above), 'Address Verification' (a message explaining that the address has been formatted to U.S. Postal Service standards and instructions on how to proceed), and 'Address Information' (radio buttons for 'U.S. Postal Service Standardized Address' and 'Address You Entered', with the corresponding address details: '10 E 5TH ST AUSTIN, TX 78778-1442'). 'Next' and 'Previous' buttons are at the bottom.

## Review and Submit

Review the information in the **Employer Information** section and **Designated Address Contact Information** sections.

If corrections are needed, select Previous to return to the **Edit Information** page.

If everything is correct, select the **Box** then select **Submit**.

The program then proceeds to a confirmation page.

**Employer Designated Address: Review And Submit**

**User Information**

Name: \_\_\_\_\_ User ID: \_\_\_\_\_  
Email Address: \_\_\_\_\_ [Update E-mail Address](#)  
Employer: \_\_\_\_\_

\* indicates required information

**Address Type**

DESIGNATED ADDRESS

**Employer Information**

Only the Designated Address will be changed or established.

TWC Tax Account Number: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Additional Name (DBA): \_\_\_\_\_ (No response provided)  
Care of: \_\_\_\_\_ (No response provided)  
Attention: \_\_\_\_\_ (No response provided)  
Mailing Address: 10 E 5TH ST  
AUSTIN, TX 78778-1442

**Designated Address Contact Information**

First Name: R  
Middle Initial: C  
Last Name: E  
Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_ (No response provided)  
Email Address: \_\_\_\_\_

**Last Submitter Information**

Name: \_\_\_\_\_  
Last Changed: August 22, 2019 12:20 AM CT

**Certification**

\* By checking this box, I certify that I am authorized to submit this information on behalf of this employer and the information I give is true, accurate and complete.

## Chargeback Response

To begin a **Chargeback Response**, select **Maximum Potential Chargeback Notice** from **Quick Links** on the **Other Services Information** page.

### Getting Started

Enter the SSN of the claimant referred to on the Maximum Potential Chargeback Notice.

**Chargeback Response: Getting Started**

**User Information**

Name: \_\_\_\_\_ User ID: \_\_\_\_\_  
Email Address: \_\_\_\_\_ [Update E-mail Address](#)  
Employer: \_\_\_\_\_

\* indicates required information

**ⓘ A correct mailing address is necessary to receive future Chargeback correspondence, if you need to update your Chargeback mailing address, please select "Designated Address" on the Quick Links menu and navigate to the Chargeback option in the drop-down menu. If you cannot access the Designated Address link, please contact your account administrator.**

**ⓘ Your data will not be submitted if you log off before receiving a confirmation message.**

Enter the claimant's Social Security Number found on the upper right-hand corner of the Notice of Maximum Potential Chargeback form.

Social Security Number (SSN): \*   
(With or without dashes.)

## Wage and Separation Information

On the **Chargeback Responses: Wage Information** page, review the wage credits and indicate if the wages are incorrect.

Select **Next**.

The program proceeds to the **Chargeback Responses: Separation Information** page. Submit the separation reason and the last day of work then select **Next**.

TEXAS WORKFORCE COMMISSION | Logoff

### Employer Benefit Services

Other Services

**Progress**

- Getting Started
- Wage Information
- Separation Information
- Review and Submit
- Confirmation

#### Chargeback Response: Wage Information

**User Information**

Name: \_\_\_\_\_ User ID: \_\_\_\_\_  
Email Address: \_\_\_\_\_ [Update E-mail Address](#)  
Employer: \_\_\_\_\_

\* indicates required information

Claimant Name: Gerald  
Social Security Number (SSN): \_\_\_\_\_  
Claim Date: April 09, 2017

Quarters Used	Wages on Record	Source (if other than Quarterly Report)	Page	Unit
JAN FEB MAR 2016	\$1,221.38	EXAMINATION OF HARDCOPY C-4	1	
APR MAY JUN 2016	\$148.75	EXAMINATION OF HARDCOPY C-4	1	

**Wage Information**

If the claimant's quarterly wages are incorrect, please go to Unemployment Tax Services at <https://apps.twc.state.tx.us/UITAXSERV/security/login.do> to make online corrections or go to <https://twc.texas.gov/businesses/unemployment-tax> to download paper adjustment forms.

Maximum Potential Chargeable Amount: \$269.31

Are any quarters listed incorrect? \*  Yes  No

If Yes:  
Check the appropriate box below.

JAN FEB MAR 2016  
 APR MAY JUN 2016

TEXAS WORKFORCE COMMISSION | Logoff

### Employer Benefit Services

Other Services

**Progress**

- Getting Started
- Wage Information
- Separation Information
- Review and Submit
- Confirmation

#### Chargeback Response: Separation Information

**User Information**

Name: \_\_\_\_\_ User ID: \_\_\_\_\_  
Email Address: \_\_\_\_\_ [Update E-mail Address](#)  
Employer: \_\_\_\_\_

\* indicates required information

**Claim Information**

Claimant Name: Gerald  
Social Security Number (SSN): \_\_\_\_\_  
Claim Date: April 09, 2017

**Separation Details**

Select an applicable work Separation Reason. If the Separation Reason is not listed, select "Other," provide a brief explanation and complete the Chargeback Response information.

Separation Reason: \*   
Other Separation Information:   
120 of 120 characters remaining

**Claimant Details**

Last Date of Work: February 26 Year: 2017

## Review and Submit

Carefully review all the information in the **Claim Information**, **Wage Information**, and **Separation Information** sections.

Certify that all the information is correct by selecting the **Box**.

Select **Submit**.

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### Employer Benefit Services

Other Services

#### Chargeback Response: Review and Submit

**Progress**

- Getting Started
- Wage Information
- Separation Information
- > Review and Submit
- Confirmation

**User Information**

Name: \_\_\_\_\_ User ID: \_\_\_\_\_  
Email Address: \_\_\_\_\_ [Update E-mail Address](#)  
Employer: \_\_\_\_\_

\* indicates required information

**ⓘ Your Chargeback Response is NOT COMPLETE until you select the "Submit" button at the bottom of this page and receive a confirmation message.**

**ⓘ Carefully review your responses for accuracy and make any necessary corrections. To make changes or corrections, select the "Edit" link for that section.**

**Claim Information**

Employer Account Number: \_\_\_\_\_  
Employer Name: \_\_\_\_\_ P C  
Claimant Name: \_\_\_\_\_ Gerald  
Social Security Number (SSN): \_\_\_\_\_  
Claim Date: \_\_\_\_\_ April 09, 2017

**Wage Information**

If the claimant's quarterly wages are incorrect, please go to Unemployment Tax Services at <https://apps.twc.state.tx.us/UTAXSERV/security/lookup.do> to make online corrections or go to <https://twc.texas.gov/businesses/unemployment-tax> to download paper adjustment forms.

Are any quarters listed incorrect? \_\_\_\_\_ Yes

**Quarters indicated as Incorrect**

JAN FEB MAR 2016	No
APR MAY JUN 2016	Yes

[Edit Wage Information](#)

**Separation Information**

Separation Reason: \_\_\_\_\_ LACK OF WORK OR REDUCTION IN FORCE  
Other Separation Information: \_\_\_\_\_ (Not applicable)  
Last Date of Work: \_\_\_\_\_ February 26, 2017

[Edit Separation Information](#)

**Submitter Information**

Submitted By: \_\_\_\_\_ (No response provided)  
Submission Time: \_\_\_\_\_ (No response provided)

**Certification**

\* By checking this box, I certify that I am authorized to submit this information on behalf of this employer and the information I give is true, accurate and complete.

Caution: Your Chargeback Response information is NOT COMPLETE until you select the "Submit" button.


## Confirmation

The **Chargeback Response: Confirmation** page confirms that the chargeback response has been successfully submitted.

Save the page as a PDF or print it.

Select **Return to My Home** to return to the **EBS My Home** page.

Select **Return to Other Services** to return to the **Other Services Information** page or select **Respond to Another Notice** to submit another designated address and chargeback response.

Logout

### Employer Benefit Services

Other Services

**Progress**

- Getting Started
- Wage Information
- Separation Information
- Review and Submit
- > Confirmation**

### Chargeback Response: Confirmation

**User Information**

Name: \_\_\_\_\_ User ID: \_\_\_\_\_

Email Address: \_\_\_\_\_ [Update E-mail Address](#)

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

**Your Chargeback Response has been submitted on August 22, 2019 11:13 AM CT**  
[Print this page. This is your only opportunity to view and print this information.](#)

To save this page for your records, select the "Save as PDF" button on this page.  
To print this page for your records, select the "Printer Friendly" button on this page or use the printer icon on your browser's toolbar.

[Save as PDF](#) [Printer Friendly](#) [Return to My Home](#)

### Claim Information

Employer Account Number:	
Employer Name:	P C
Claimant Name:	Gerald
Social Security Number (SSN):	
Claim Date:	April 09, 2017

### Wage Information

If the claimant's quarterly wages are incorrect, please go to Unemployment Tax Services at <https://apps.twc.state.tx.us/UITAXSERV/security/login.do> to make online corrections or go to <https://twc.texas.gov/businesses/unemployment-tax> to download paper adjustment forms.

Are any quarters listed incorrect?	Yes
<b>Quarters indicated as Incorrect</b>	
JAN FEB MAR 2016	No
APR MAY JUN 2016	Yes

### Separation Information

Separation Reason:	LACK OF WORK OR REDUCTION IN FORCE
Other Separation Information:	(Not applicable)
Last Date of Work:	February 26, 2017

### Submitter Information

Submitted By:	Twcebs Twcebs
Submission Time:	August 22, 2019 11:13 AM CT

[Return to Other Services](#) [Respond to Another Notice](#)

## Contact

For help call the Chargeback Unit at 512-340-4336.