

Tab-Delimited Layout Specifications

The Pennsylvania New Hire Reporting Program

Field #	Field Description	Data Type	Max Length	Lawful Status	Details	
1	Record Identifier	Numeric	2	Req	Enter the numbers <b>02</b> to identify the start of a each record row.	
2	Employer FEIN	Numeric	9	Req	The Federal Employer Identification Number. No dashes or spaces.	
3	Employer Name	Alpha	45	Req	The company name that is associated with the FEIN.	
4	Employer Address Line 1	Alpha	Numeric	40	Req	Employer's address Line 1
5	Employer Address Line 2	Alpha	Numeric	40	Opt	If none, leave blank.
6	Employer Address Line 3	Alpha	Numeric	40	Opt	If none, leave blank.
7	Employer City	Alpha	25	Req	Employer City	
8	Employer State	Alpha	2	Req	Use 2-character abbreviation. Example: PA	
9	Employer Zip Code - 1st 5 digits	Numeric	5	Req	U.S. 5-digit Zip Code. No dashes.	
10	Employer Zip Code - last 4 digits	Numeric	4	Opt	The +4 digits of the Zip Code. If none, leave blank.	
11	Employer Contact First name	Alpha	16	Req	Employer's representative authorized to answer questions about the new hire report.	
12	Employer Contact Last Name	Alpha	30	Req	This can be someone from the payroll company.	
13	Employer Contact Phone Number	Numeric	10	Req	No dashes, spaces or parenthesis. Must include the 3-digit area code. No dashes.	
14	Extension No. for Contact Person	Numeric	5	Opt	If none, leave blank.	
15	Employee Social Security Number	Numeric	9	Req	Must be a valid 9-digit SSN. No dashes, spaces or parenthesis.	
16	Employee First Name	Alpha	16	Req	The Employee's Full Legal First Name as it appears on their Social Security Card.	
17	Employee Middle Name	Alpha	16	Opt	Middle initials are acceptable. Do not use any punctuation.	
18	Employee Last Name	Alpha	30	Req	The Employee's Full Legal Last Name as it appears on their Social Security Card.	
19	Employee Date of Birth	Numeric	8	Opt	<b>YYYYMMDD</b> format only. Example: <b>19991231</b>	
20	Employee State of Hire	Alpha	2	Req	Use 2-character abbreviation. Example: PA	
21	Employee Date of Hire	Numeric	8	Req	<b>YYYYMMDD</b> format only. Example: <b>20141125</b>	
22	Employee Address Line 1	Alpha	Numeric	40	Req	Employee's physical street address.
23	Employee Address Line 2	Alpha	Numeric	40	Opt	If none, leave blank.
24	Employee Address Line 3	Alpha	Numeric	40	Opt	If none, leave blank.
25	Employee City	Alpha	25	Opt	Employee City	
26	Employee State	Alpha	2	Req	Use 2-character abbreviation. Example: PA	
27	Employee Zip Code - 1st 5 digits	Numeric	5	Req	U.S. 5-digit Zip Code. No dashes.	
28	Employee Zip Code - last 4 digits	Numeric	4	Opt	The +4 digits of the Zip Code. If none, leave blank.	
29	Filler	Alpha	Numeric	4	Req	Leave blank, reserved for future use.
30	Filler	Alpha	Numeric	15	Req	Leave blank, reserved for future use.

Questions?

Call 1-888-PAHIRES (1-888-724-4737)  
 or email RA-LI-CWDS-NEWHIRE@pa.gov

Note:

Do not omit fields.  
 Data must be delimited by the TAB character: HT(09)  
 Must have the **.txt** file extension.