

## EMPLOYER'S APPLICATION FOR A REFUND OF EMPLOYMENT INSURANCE PREMIUMS UNDER THE NEW HIRES PROGRAM

If you are a small business or you have started a new business, you may be eligible to receive a refund under the New Hires Program. To find out if you are entitled to this refund, get the pamphlet called the *New Hires Program* and the *Employers' Guide to Payroll Deductions - Basic Information*.

Were you associated with any other employer at any time during the year?

No - complete Part 1     Yes - complete Part 2

Which year is your claim for?

1997     1998

### Part 1 - Non-Associated Employers

Employer's name	Business Number	1996 EI Premiums	1997 EI Premiums	1998 EI Premiums
		A	B	C

### Part 2 - Associated employers - If you need more space, use an attachment.

Employer's name	Business Number	1996 EI Premiums	1997 EI Premiums	1998 EI Premiums
<b>Totals</b>		A	B	C

If the total EI premiums for 1996 in Box A is greater or equal to \$60,000, you are not eligible to receive benefits under this program.

If the total EI premiums for 1996 in Box A is lesser or equal to \$50,000, you may be eligible to receive a benefit of up to \$10,000. If this is the case, complete Part 4 for 1997 and /or Part 5 for 1998.

If the total EI premiums for 1996 in Box A is more than \$50,000 but less than \$60,000, the benefit will start to phase out on every dollar of premiums paid over \$50,000. If this is the case, complete Part 3 before you complete Part 4 for 1997 and /or Part 5 for 1998.

### Part 4 - Refund for 1997

Enter amount B from Part 1 or Part 2 (whichever applies)	4
Enter amount A from Part 1 or Part 2 (whichever applies) \$ _____ + \$250	5
Line 4 <b>minus</b> line 5	6
Line 3, line 6 or \$10,000, whichever amount is lesser	7

### Part 3 - Threshold calculation

(If the EI premiums for 1996 are more than \$50,000 but less than \$60,000.)

Enter amount A from Part 1 or Part 2 (whichever applies)	1
<b>Less: threshold amount</b>	<b>- \$50,000</b>
Amount of reduction	2
<b>Maximum benefit</b> \$10,000 <b>minus</b> line 2	3

### Part 5 - Refund for 1998

Enter amount C from Part 1 or Part 2 (whichever applies)	8
Enter amount A from Part 1 or Part 2 (whichever applies) \$ _____ + \$250	9
Line 8 <b>minus</b> line 9	10
Line 10 _____ x 25 %	11
Line 3, line 11 or \$10,000, whichever amount is lesser	12

### Election to allocate benefits for associated employers - If you need more space, use an attachment.

Employer's name	Business Number	1997	1998

### Certification

I, \_\_\_\_\_ certify that the information given on this form is, to the best of my knowledge, correct and complete.

\_\_\_\_\_  
 Contact person                      Authorized person's signature                      Date                      Telephone number