

Department of Labor and Workforce Development

UNEMPLOYMENT INSURANCE

TO EMPLOYEES OF GOVERNMENTAL ENTITIES AND INSTRUMENTALITIES

YOUR EMPLOYER is subject to the New Jersey Unemployment Compensation Law.

Benefits are payable to workers who lose their jobs or who are working less than full-time because of a lack of full-time work and who meet the eligibility requirements of the law.

If you become totally or partially unemployed, file a claim for unemployment benefits as soon as possible. You may file your claim by telephoning a Reemployment Call Center, or if you meet certain requirements, via the Internet at www.njuifile.net

Union City Call Center	(serves northeast NJ)	(201) 601-4100
Freehold Call Center	(serves northwest & central NJ)	(732) 761-2020
Cumberland Call Center	(serves southern NJ)	(856) 507-2340

Both employers and workers participate in the financing of the Unemployment Insurance program. The employer has the option of either reimbursing the Unemployment Trust Fund for any unemployment benefits paid to former employees, or paying contributions based on taxable payroll. The taxable wage base is subject to change each calendar year. The deduction must be noted on your paycheck stub, pay envelope, or by some other form of notice, as well as your W-2 form.

TEMPORARY DISABILITY INSURANCE

Your employer is **not** subject to the New Jersey Temporary Disability Benefits Law

County and municipal governments as well as other governmental entities (with the exception of State government) are excluded from automatic coverage under the New Jersey Temporary Disability Benefits Law. They may, however, elect coverage for their workers effective January 1 of any calendar year. Your employer has chosen not to elect this coverage. Therefore, you would not be eligible for benefits under New Jersey's Temporary Disability Insurance Program based on wages with this employer.

IMPORTANT

EVERY EMPLOYER SUBJECT TO NEW JERSEY UNEMPLOYMENT COMPENSATION LAW, INCLUDING THOSE WHO HAVE VOLUNTARILY ELECTED TO BECOME SUBJECT, MUST POST AND MAINTAIN PRINTED NOTICES INFORMING WORKERS OF THE EMPLOYER'S COVERAGE.

ADDITIONAL COPIES OF THIS POSTER MAY BE OBTAINED BY WRITING:

DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT
OFFICE OF CONSTITUENT RELATIONS
PO BOX 110
TRENTON, NEW JERSEY 08625-0110
(609) 777-3200

COPIES MAY ALSO BE OBTAINED THROUGH OUR WEBSITE AT:

www.nj.gov/labor

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