

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

**Reemployment Assistance Division**

PO Box 4730, Aberdeen, SD 57402-4730

Tel: 605.626.2312

Fax: 605.626.3347

[dlr.sd.gov](http://dlr.sd.gov)

**REGISTRATION FOR STATE INFORMATION DATA EXCHANGE SYSTEM  
(SIDES) E-RESPONSE**

Business Name: \_\_\_\_\_

**Mailing Address Where You Currently Receive Reemployment Assistance (RA) Claim Notices:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Federal ID Number: \_\_\_\_\_ SD RA Account Number: \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email where you want to receive notice of claims:

By choosing "I ACCEPT" below, you agree to the following: You will no longer receive paper reemployment assistance benefits claim notices sent through the US Postal Service. You will receive an email notification whenever a Reemployment Assistance Employer Notice is ready for you to view and respond to electronically on the SIDES E-Response website. **You must add [SDRADSIDES@state.sd.us](mailto:SDRADSIDES@state.sd.us) to your email address book and notify your IT department to ensure that these email notifications reach your inbox instead of being blocked as spam.**

The Reemployment Assistance Employer Notice response time limit specified by South Dakota statute (within 15 business days of the date of the Notice) **will not be extended**. No extension will be granted due to a misdirected email because you failed to notify the Department of a change in your email address or misplaced your SIDES E-Response PIN/Access Code. If you misplaced your PIN/Access Code, contact the Department at 605.626.2310 for assistance. If your email address or contact information changes, you must submit a new SIDES application form. To obtain the form, call the Department at 605.626.2310 or go to [dlr.sd.gov](http://dlr.sd.gov) for a printable version.

**I Accept** (This must be selected or your application to register for SIDES E-Response will not be approved.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

**RETURN YOUR COMPLETED, SIGNED APPLICATION TO THE DEPARTMENT BY ONE OF THE METHODS BELOW:**

**U.S. Postal Service**

SIDES Registration

Attn: Deserae

PO Box 4730

Aberdeen, SD 57402-4730

**FAX:**

605.626.2322

**EMAIL: (scanned copy)**

[SDRADSIDES@state.sd.us](mailto:SDRADSIDES@state.sd.us)