



Office of Economic Security **Division of Child Support Services** 

## **COLORADO STATE DIRECTORY OF NEW HIRES**

## **Fixed-Width Text File Layout & Instructions**

All fields listed below must be included in the order provided.

Optional fields **must** be included but if no data is available, make sure to fill with spaces to the length specified.

Provide one line per record followed by a carriage return and line feed (CRLF).

See the Example Fixed-Width File on the File Upload page

Field	Туре	Length	Position	Status	Comments
Record Identifier	Char	17	1-17	Required	The following text: "CO Newhire Record" - Case does not matter.
Format Version Number	Char	4	18-21	Required	The following text: "2.00"
		Empl	oyee Inforn	nation	
Employee First Name	Char	16	22-37	Required	At least one character, no special characters.
Employee Middle Name	Char	16	38-53	Optional	If non-blank must be at least one character, no special characters.
Employee Last Name	Char	30	54-83	Required	At least one character, no special characters except hyphen.
Employee SSN#	Numeric	9	84-92	Required	As reported by employee. Numeric only, no hyphens. 9 digits.
Employee Address Line 1	Char	40	93-132	Required	At least two characters, left justify.
Employee Address Line 2	Char	40	133-172	Optional	Left justify. Spaces if unused.
Employee Address Line 3	Char	40	173-212	Optional	Left justify. Spaces if unused.
Employee City	Char	25	213-237	Required	At least two characters, no special characters except hyphen.
Employee State	Char	2	238-239	Required	Valid state or territory abbreviation. If foreign address, state is not required.
Employee Postal Code	Numeric	20	240-259	Required	If a domestic address then only U.S. 5 digit zip code, left justified.
Employee Zip+4	Numeric	4	260-263	Optional	If present, must be 4 digits. Numeric only, no hyphens.
Employee Country Code	Char	2	264-265	Optional	For foreign addresses only. Refer to U.S. Department of Commerce FIPS code manual, National Institute of Standards and Technology, FIPS PUB 10-4 (April 1995).
Employee Date of Birth	Numeric	8	266-273	Optional	If present, numeric. Format - MMDDYYYY
Employee Date of Hire	Numeric	8	274-281	Required	Numeric. Format - MMDDYYYY
Employee State of Hire	Char	2	282-283	Optional	Valid state or territory abbreviation.
Independent Contractor?	Char	1	284-284	Required	Y for Yes, N or blank for No.
Filler	Char	1	285-285	Optional	Fill with spaces. Reserved for future use.

Field	Туре	Length	Position	Status	Comments
		Employer Information			
Employer FEIN	Numeric	9	286-294	Required	Federal Employer Identification Number (no hyphens). Use the same FEIN under which employee quarterly wages will be reported. 9 digits.
Filler	Char	12	295-306	Optional	Reserved for future use.
Employer Name	Char	45	307-351	Required	At least two characters, left justify.
Employer Address Line 1	Char	40	352-391	Required	At least two characters, left justify. Please use the same address that is used for the processing of Income Withholding Orders.
Employer Address Line 2	Char	40	392-431	Optional	Left justify if present. Spaces if unused
Employer Address Line 3	Char	40	432-471	Optional	Left justify if present. Spaces if unused
Employer City	Char	25	472-496	Required	At least two characters, left justify
Employer State	Char	2	497-498	Required	Valid state or territory abbreviation. If foreign address, state is not required.
Employer Postal Code	Char	20	499-518	Required	If a domestic address then only U.S. 5 digit zip code, left justified.
Employer Zip+4	Numeric	4	519-522	Optional	If present, must be 4-digits. Spaces if unknown.
Employer Country Code	Char	2	523-524	Optional	For foreign addresses only. Refer to U.S. Department of Commerce FIPS code manual, National Institute of Standards and Technology, FIPS PUB 10-4 (April 1995).
Employer Phone Number	Numeric	10	525-534	Optional	10 digits, no hyphens or parentheses
Employer Phone Extension	Numeric	6	535-540	Optional	Numeric only.
Employer Contact	Char	20	541-560	Optional	Employer contact name
Employer Optional Address 1	Char	40	561-600	Optional	At least two characters, left justify.
Employer Optional Address 2	Char	40	601-640	Optional	If present, at least two characters, left justify.
Employer Optional Address 3	Char	40	641-680	Optional	If present, at least two characters, left justify.
Employer Optional City	Char	25	681-705	Optional	At least two characters, left justify
Employer Optional State	Char	2	706-707	Optional	Valid state or territory abbreviation. If foreign address, state is not required.
Employer Optional Postal Code	Char	20	708-727	Optional	If a domestic address then only U.S. 5 digit zip code, left justified.
Employer Optional Zip+4	Numeric	4	728-731	Optional	If present, must be 4-digits. Spaces if unknown.
Employer Optional Country Code	Char	2	732-733	Optional	For foreign addresses only. Refer to U.S. Department of Commerce FIPS code manual, National Institute of Standards and Technology, FIPS PUB 10-4 (April 1995).
Employer Optional Phone Number	Numeric	10	734-743	Optional	10 digits, no hyphens or parentheses
Employer Optional Phone Extension	Numeric	6	744-749	Optional	Numeric only.
Employer Optional Contact Name	Char	20	750-769	Optional	Employer optional contact name
Filler	Char	91	770-860	Optional	Fill with spaces. Reserved for future use.

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