

UPPER SAUCON TOWNSHIP

WORKERS' COMPENSATION INSURANCE COVERAGE EXEMPTION AFFIDAVIT

(Attach to building permit application)

This affidavit must be completed if the applicant for a building permit is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reason, as indicated:

_____ Contractor with no employees. **The contractor is prohibited by law from employing an individual to perform work pursuant to this building permit unless the contractor provides proof of insurance to Upper Saucon Township.**

_____ Religious exemption in accordance with the Pennsylvania Workers' Compensation Law.

Federal or State Employer Identification Number: _____

Applicant's Signature

Date

Phone Number

Print Name of Applicant

Mailing Address

Subscribed and sworn to before me this
_____ day of _____ 20____.

(Signature of Notary Public)

My commission expires: _____

(seal)