



Revitalizing Communities • Elevating Performance • Impact Lives • Gratitude Always

Exemption from Workers' Compensation

(Please disregard this form if you are in possession of a current and legal Workers' Compensation Insurance Policy)

Before REIG Companies can issue a construction contract, the vendor or contractor must have on file a Certificate of Workers' Compensation Insurance or a Certificate of Self-Insurance issued by the Division of Industrial Relations for the qualifying state, or must verify exemption by completing and submitting this document.

To be exempt from workers' compensation, contractor must submit this form to REIG Companies, certifying that he or she does not employ anyone in a manner that is subject to the workers' compensation laws of any state in which they are providing and/or performing labor ("qualifying state"). *(Please reference the IRS website and employment/labor laws of each qualifying state in which labor is being provided and/or performed.)*

DO NOT SUBMIT THIS FORM IF:

- You have an inactive contractor's license (if applicable in the qualifying state).
- The license qualifier is a Responsible Managing Employee (RME) (if applicable in the qualifying state).
- You have employees.

For exemption from workers' compensation, complete all of the requested information in Section 1, check only one of the boxes in Section 2, and date and sign the form in Section 3.

SECTION 1 – REQUIRED BUSINESS NAME AND ADDRESS

Legal Business Name

Business Mailing Address (number/street or P.O. Box) City State Zip Code

Business Street Address (number/street only – **NO P.O. Boxes**) City State Zip Code – if different from address above

Business Phone Number Business Fax Number Business E-mail Address

SECTION 2 – REQUIRED CHECK BOX

YOU MUST CHECK ONLY ONE OF THE BOXES BELOW.

I do not employ anyone in the manner subject to the workers' compensation laws of your qualifying state and IRS.

OR

I am an out-of-state contractor, and I do not hire employees who reside in the qualifying state I am performing work. (You must provide a certificate of insurance from your workers' compensation insurance carrier in your home state.)

SECTION 3 – REQUIRED SIGNATURE

I certify under the laws of the qualifying state and IRS that the information provided on this exemption statement is true and accurate. I understand that, upon employing anyone in a manner that is subject to the workers' compensation laws of the qualifying state and IRS, the claim of exemption executed under this form will no longer be valid. I also understand that, as soon as I employ anyone subject to the qualifying state's workers' compensation laws and IRS, I must obtain a Certificate of Workers' Compensation Insurance and submit that certificate to REIG Companies. I also understand I will not be allowed to have any employees on REIG Companies job sites until my coverage is in place and REIG Companies has a copy of my certificates of insurance and compliance documentation. I am, furthermore, required to continuously maintain the coverage provided by the certificate in accordance with the law. I understand that failure to comply with this requirement is grounds for project termination and possible reporting to the ruling agency in the applicable state.

Date	Signature of Contractor (Owner, Partner, or Officer)	Printed Name of Contractor (Owner, Partner, or Officer)