

# WORKER'S COMPENSATION INSURANCE-COVERAGE INFORMATION FORM

## Jackson Township Monroe County, Pennsylvania

Name of applicant: \_\_\_\_\_

Applicant or Contractor is a contractor within the meaning of the Pennsylvania Worker's Compensation Law?

YES \_\_\_\_\_ NO \_\_\_\_\_

If the answer is "yes" complete Section B & D below as appropriate

If the answer is "no" complete sections C & D below as appropriate

### SECTION B:

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Contractor \_\_\_\_\_ Federal or State Employer Identification  
No. \_\_\_\_\_

Applicant is a qualified self-insurer for worker's compensation \_\_\_\_\_ Certificate attached

Name of Worker's Compensation Insurer \_\_\_\_\_

Certificate Attached \_\_\_\_\_ Policy No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

### SECTION C:

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Exemption (Complete Section C if the applicant is a contractor claiming exemption from providing worker's compensation.)

The undersigned swears or affirms that he/she is not required to provide worker's compensation insurance under the provisions of Pennsylvania's Worker's Compensation Law for one of the following reasons, as indicated;

\_\_\_\_\_ **Property owner doing the work.** If the property owner does not hire contractor to perform any work pursuant to building permit, contractor must provide proof of Worker's Compensation Insurance to Jackson Township. Homeowner assumes liability for contractor compliance with this requirement.

\_\_\_\_\_ **Contractor with no employees.** Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to Jackson Township.

\_\_\_\_\_ **Religious exemption under Worker's Compensation Law.** All employees of contractor are exempt from Worker's Compensation insurance (attach copies of religious exemption letters for all employees).

### SECTION D:

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Applicant Name \_\_\_\_\_ Municipality \_\_\_\_\_

Address \_\_\_\_\_ County of \_\_\_\_\_

Subscribed, sworn to and acknowledged before me by the above this

\_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public