



Planning & Development Services

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Affidavit of Worker's Compensation for General Contractors

Completion of this is required by N.C.G.S. 87-14 when the project cost is \$40,000 or more.

I understand that by signing this document I certify that I am making a truthful statement. I have entered into a construction contract where the cost of the undertaking is \$40,000.00 or more.

I certify that I am:

- General Contractor or his/her authorized agent and presently licensed by the State of North Carolina. My license number is _____. My license is active and in good standing. I have filed all the necessary renewals with the North Carolina Licensing Board for General Contractors. I am not presently under any disciplinary order issued by the Licensing Board, which disqualifies me for entering into a construction contract.
- Unlicensed Contractor or his/her authorized agent
- Property Owner or his/her authorized agent

I have in effect all required worker's compensation insurance coverage and I agree to submit certificates of such coverage to the building inspector upon request. I understand that I am responsible for ascertaining whether I am obligated by law to obtain worker's compensation coverage and to assure that my insurance coverage is adequate. While working on the project for which this permit is sought it is understood that the inspection department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying the work.

I do hereby affirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- Have three (3) or more employees and have obtained worker's compensation insurance to cover them.
- Have one or more subcontractors and have obtained worker's compensation insurance to cover them.
- Have one or more subcontractors who have their own policy of worker's compensation covering them.
- Have no more than two (2) employees and no subcontractors.

Firm name: _____ By: _____

Title: _____ Date: _____

Signature