

NON-EMPLOYEE WORK AGREEMENT

TO: _____, a Vermont Municipality:

I, the undersigned sole proprietor or partner owner of an unincorporated business,

_____ (name of business),

of _____ (business address),

hereby certify that I am aware of my right to purchase Workers' Compensation insurance and have elected to either purchase workers' compensation insurance as described below or not to purchase workers' compensation insurance.

Scope and dates of work to be performed: _____

Under 21 VSA § 601 (14), sole proprietors and partner owners of an unincorporated business: whose work is distinct and separate from the municipality's work; who control the means and manner of the work performed; who hold themselves out as in business for themselves; who hold themselves out for work for the general public and do not perform work exclusively for or with another person; and who are not treated by the municipality as an employee for purposes of income or employment taxation with regard to the work performed; are **not** considered workers or employees of the municipality.

I, the undersigned, hereby attest that I have procured workers' compensation insurance from:

Carrier: _____ Effective dates: _____ to _____

Limits of liability: _____

I am attaching a valid Certificate of Insurance from my workers' compensation insurance carrier.

-OR-

I, the undersigned, hereby attest that I am a sole proprietor or partner owner of an unincorporated business, and as such I am not considered to be a worker or employee under the provisions of 21 VSA § 601 (14).

I affirm that:

- I am not a worker or employee of _____ (municipality),
- I am working independently,
- I have no employees, and
- I have not contracted with other independent contractors.
- I understand that I have the right to purchase workers' compensation insurance and I have elected not to purchase workers' compensation insurance.

Date: _____ Print Name: _____

Witness: _____ Sign Name: _____