

**AFFIDAVIT OF WORKERS COMPENSATION COVERAGE**

**N.C.G.S. 87-14**

The undersigned applicant for Building Permit # \_\_\_\_\_ being the  
**Contractor                      Owner                      Officer/Agent of the Contractor or Owner**

**Does hereby affirm under penalties of perjury that the person(s), or corporation(s)**

**Performing the work set forth in the permit:**

**has/have three (3) or more employees and have obtained workers compensation insurance to cover them.**

**has/have one or more subcontractor(s) and have obtained workers compensation insurance covering them.**

**has/have one or more subcontractor(s), who has/have no employees and has waived in writing their right to coverage by their contractor or have their own policy of workers compensation covering themselves.**

**has/have not more than two (2) employees and no subcontractors.**

**While working on the project for which this permit is sought. It is understood that the Inspection Dept issuing the permit may require certificates of coverage and/or waivers of workers compensation insurance coverage prior to issuance of the permit and at any time during the permitted work from any person, firm, or corporation carrying out the work.**

**Signature** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date** \_\_\_\_\_