

<b>SECTION 1 – Business name</b>			
Business name as registered with North Dakota (ND) Secretary of State		Trade name or DBA as registered with ND Secretary of State	
Name of individual completing this form		Business Federal Tax ID number	
Telephone number		Email address	
<b>SECTION 2 – Type of ownership</b>			
<input type="checkbox"/> Individual	<input type="checkbox"/> Cooperative	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Association	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Government
<input type="checkbox"/> Corporation	<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> Sub-S Corporation	
<b>SECTION 3 – Business address</b>			
Mailing address			
City		State	ZIP code
<b>SECTION 4 – Officer(s), partner(s), and owner(s) – List all for this business – Attach a separate sheet of paper if more space is needed</b>			
First name	Last name	Title	Social Security number*
<b>SECTION 5 – Work to be conducted in ND</b>			
Detailed description of work to be performed in ND			
Address or location where work will be performed in ND			
City	ZIP code	Start date of work in ND	End date of work in ND
Are you a <input type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor		If subcontractor, name of general contractor you are working for in ND	
Address of general contractor you are working for in ND			
Name of subcontractor or independent contractor you will be utilizing in ND**			Telephone number
Address			
Name of subcontractor or independent contractor you will be utilizing in ND**			Telephone number
Address			
Name of subcontractor or independent contractor you will be utilizing in ND**			Telephone number
Address			

SFN 53068 (11/2017)

Business name

**SECTION 6 – ND based businesses – Check all that apply**

The purpose of this form is to acknowledge that you, a ND business, do not have employees at this time and currently are not required to obtain workers' compensation insurance coverage with Workforce Safety & Insurance (WSI) under North Dakota Century Code (N.D.C.C.) § 65-01-02(16). ND law, with limited exceptions, requires all employers to secure insurance to cover their full-time, part-time, seasonal, or occasional employees prior to hiring. To be insured in ND, you must submit an application available online at [www.workforcesafety.com](http://www.workforcesafety.com).

- My business currently does not employ any workers as defined above as a ND business. It is understood that if my business does employ worker(s) in the future, I will comply with ND law and obtain workers' compensation insurance coverage prior to employing workers.
- I have never employed or hired workers in ND.

**SECTION 7 – Out-of-state businesses – Check all that apply**

The purpose of this form is to acknowledge that you, an out-of-state business, do not have employees at this time and currently are not required to obtain workers' compensation insurance coverage with WSI under N.D.C.C. § 65-08-01(4). Out-of-state businesses working in ND are required to secure WSI insurance coverage if you employ ND based worker(s) or enter into an employment agreement(s) in ND.

If you bring out-of-state employees into ND and this exposure results in significant contacts with ND, coverage is mandatory.

Significant contacts are defined as:

- Any employee earns or is expected to earn 25% or more of their gross annual wage from services rendered within ND.
- My business pays or is expected to pay 25% or more of our gross annual payroll to employees for services rendered in ND.
- My business hires an employee in ND for work in ND.

- My business currently does not have significant contacts as defined above.
- My business currently does not employ any workers as defined above as an out-of-state business. It is understood that if my business does employ worker(s) in the future, I will comply with ND law and obtain workers' compensation insurance coverage prior to employing workers.
- I have never employed or hired workers in ND.

**SECTION 8 – Comments**

**SECTION 9 – Signature**

It is understood that if my business does employ any worker, I will notify WSI before any actual work has been performed by any employee. I understand it is unlawful for me to employ workers without securing workers' compensation insurance coverage. I understand that failure to comply with the requirements of the North Dakota Workers' Compensation Act (N.D.C.C. § 65-04-33) may subject me to criminal, injunctive, and monetary penalties. I certify that the information contained in this verification is true and correct to the best of my knowledge. I further certify if any of the representations I have made to WSI change, I am obligated to contact WSI with accurate and current information.

<b>Signature</b>	<b>Date</b>
Title	

\* In compliance with the Federal Privacy Act of 1974, disclosure of the social security number on this form is mandatory pursuant to N.D.C.C. § 65-05-02. The social security number is used for identification and verification purposes. Failure to provide this information may result in a delay in processing your request.

\*\* Pursuant to N.D.C.C. § 65-04-26.2 (1). An individual employed by a subcontractor or by an independent contractor operating under an agreement with a general contractor is deemed to be an employee of the general contractor if the subcontractor or independent contractor does not secure coverage as required under this title. A general contractor is liable for payment of premium and any applicable penalty for an employee of a subcontractor or independent contractor that does not secure required coverage. The general contractor is liable for payment of this premium and penalty until the subcontractor or independent contractor pays this premium and penalty. The liability imposed on a general contractor under this section for the payment of premium and penalties under this title which are not paid by a subcontractor or independent contractor is limited to work performed under that general contractor.