CHATHAM COUNTY COMPLIANCE VERIFICATION General Statutes: Chapter 87-14 & 97

To provide compliance with GS 87-14 & 97, satisfactory proof must be furnished that worker's compensation insurance is in effect. Please mark the appropriate statements below:

 { } Certificate of insurance attached confirming active worker's compensation insurance coverage and showing the certificate holder as: Chatham County Central Permitting PO Box 548 Pittsboro, NC 27312

As a licensed General Contractor of the State of North Carolina, I hereby certify that I have obtained Workers' Compensation Insurance as required by G.S. Chapter 97. I will maintain the required worker's compensation insurance for the entire duration of any construction for which permits have been issued.

OR

{ } Exemption

As a licensed General Contractor of the State of North Carolina, I hereby certify that I am **exempt** from the requirements of G.S. Chapter 97 that require Workers' Compensation Insurance for General Contractors who employ three (3) or more employees. If at any time I employ three or more employees, I will provide Chatham County, from which I have obtained permits under an exempt status, the required certificate of insurance.

Signature of License Holder

Print Licensee Name & License Number

Sworn and subscribed before me this ______ day of ______, ____.

Official Seal Notary Public _____

My Commission expires_____,