TOWN OF BURNSVILLE BUILDING INSPECTIONS
AFFIDAVIT OF WORKERS' COMPENSATION COVERAGE
NORTH CAROLINA GENERAL STATUES 87 AND 97

The undersigned applicant for Building Permit Number _____ being the

☐ Unlicensed Contractor ☐ Licensed Contractor License Number _____

does hereby under penalties of perjury that the person(s), firm(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 (1) or more subcontractor(s) and have obtained workers' compensation insurance to cover them,
- ☐ has/have one or more subcontractor(s), who has/have no employees and have waived in writing their right to coverage by their contractor or if required have their own policy of workmen's compensation covering themselves,
- ☐ has/have not more than (2) employees and no subcontractors,
- ☐ has/have paid the licensing tax for General Contractor's as required by the Revenue Act of the State of North Carolina
- ☐ has/have applied for permit where the project cost is under $30,000 and I am therefore exempt from Licensed General Contractor requirements specified by G.S.87-14,

while working on the project for which this permit is sought. It is understood that the Yancey County Building Inspections Department may require certificates of coverage and/or waivers of workers' compensation insurance coverage prior to issuance of the permit. This document must be signed by the owner of the proprietorship, partner in the partnership, officer of the corporation or manager of the L.L.C. appearing as the contractor on the building permit.

Signatures are to be witnessed by Inspections Staff member or Notarized.

Firm Name:	
Completed By:	
Title:	
Signature:	**Date:**

Sworn to and subscribed before me this _____day of _____, 20_____.

_____ Official Seal
Signature of Notary Notary Public

My Commission expires_____, 20____. Staff member Initials:_____