

Name of SFM policyholder \_\_\_\_\_

Policy No. \_\_\_\_\_

## **Instructions to SFM policyholder**

### **When you need to use this form**

You must always have your subcontractor furnish you with a certificate showing workers' compensation coverage in force at the time of the subcontracted job. This is essential when the subcontractor uses employees.

However, an individual doing the subcontracted job by himself may not need to carry workers' compensation. If your subcontractor is working by himself and does not provide you with a Certificate of Workers' Compensation Insurance because he claims to be an independent contractor, then you must have the subcontractor fill out the form on the other side.

- 1) Make photocopies of this form. Be sure to copy both sides.**
- 2) At the top of this page, fill in your company's name and policy number.**
- 3) Have the subcontractor complete the form on the other side and return it to you promptly.** Keep it with your records and make it available to your SFM auditor.

Your SFM auditor will want copies of (1) this completed form, (2) the subcontractor's Independent Contractor Exemption Certificate, and (3) the subcontractor's Certificate of Insurance for General Liability covering the dates the work was performed. This will enable SFM to determine whether the subcontractor meets the legal criteria for "independent contractor" for purposes of calculating your workers' compensation premium.

**Determination of independent contractor status  
for workers' compensation insurance coverage**

**Note to subcontractor:** Please complete this form and return it to the person or business for which you are performing the contracted work. Please also attach copies of your insurance certificate and/or your independent contractor certificate of exemption.

Subcontractor business name \_\_\_\_\_

Operates as: sole proprietor \_\_\_\_ partnership \_\_\_\_ corporation \_\_\_\_

Dates work is to be performed \_\_\_\_\_

Yes No

- Do you plan to use or hire employees, casual labor or subcontractors during the dates for which work will be done?
- Do you maintain a separate business with your own office, equipment and materials?
- Will you be working for specific amounts of money and controlling how the work is done?
- Do you have, or have you applied for, a Federal Employer Identification Number?  
Enter your FEIN \_\_\_\_\_
- Will you incur the main expenses related to the work performed?
- Are you responsible for the satisfactory completion of the work you have contracted to perform and are you liable for failure to complete it?
- Will you receive compensation for work performed under the contract on a commission or per-job basis and not on any other basis?
- Will you realize a profit or loss under the contract?
- Do you have recurring business liabilities or obligations?
- Does the success of your business depend on business receipts being sufficient to cover expenses?

Signature \_\_\_\_\_ Date \_\_\_\_\_