

Affidavit of Workers' Compensation Coverage

(Revised 07/2021)

North Carolina General Statu	ite §87-14	
The undersigned applicant for l	Building Permit Number	being the
	Owner	
	Officer/Agent of Contractor or Owner	
Do hereby aver under penalties forth in the permit:	of perjury that the person(s), firm(s), or corporate	tion(s) performing the work set
has/have three (3) or more	e employees and have obtained workers' compen	sation insurance to cover them,
has/have one or more sub-	contractor(s) and have obtained workers' comper	nsation insurance to cover them,
has/have one or more subo	contractor(s) who has/have their own policy of w	vorkers' compensation covering themselves,
has/have not more than tw	o (2) employees and no subcontractors.	
Planning & Inspections Depar	or which this permit is sought. It is understood the ment may require certificates of coverage of work and at any time during the permitted work from ares are to be notarized.	kers' compensation insurance
Firm Name:		
By:		
Title:		
Signature:		
Date:		
County, No	orth Carolina	
Signed and sworn to before me	this day by	<u></u> .
Date:		·
(Official Seal)	My Commission expires:	