EXEMPTION from WORKERS' COMPENSATION

To be exempt from worker's compensation, you must submit an affidavit, certifying that you do not employ anyone in a manner that is subject to the workers' compensation laws of California. (*See Business and Professions Code Section 7125.*)

For exemption from worker's compensation, please complete the requested information, check the box, and sign the form.

SECTION 1 – BUSINESS NAME / SOLE PROPRIETER NAME AND ADDRESS				
FULL BUSINESS NAME				
BUSINESS MAILING ADDRESS		City	State	Zip
BUSINESS PHONE NUMBER	BUSINESS FAX NUMBER	BUSINESS E-MAIL ADDRESS		

SECTION 2 – CHECK BOX
I do not employ anyone in the manner subject to the workers' compensation laws of the State of California.

SECTION 3 – SIGNATURE		
I certify under penalty of perjury under the laws of the State of California that the information provided on this exemption statement is true and accurate. I understand that upon employing anyone in a manner that is subject to the worker's compensation laws of the State of California, the claim of exemption executed under this form will no longer be valid. I also understand that, as soon as I employ anyone subject to the California's workers' compensation laws, I must obtain a Certificate of Worker's Compensation Insurance, submit that certificate to Perris Elementary School District within 90 days of its effective date, and continuously maintain the coverage provided by the certificate in accordance with the law.		
Date	Signature of (Owner, Partner, or Officer)	