



AFFIDAVIT OF SOLE PROPRIETORSHIP

I, _____, being duly sworn upon oath do
depose and say:

That I am an independent contractor and am self-employed as a(n)
_____ and do not currently employ others to perform a
service for hire and therefore, am not required to have Worker's Compensation
Insurance pursuant to MN Statue S176.041. Further, I affirmatively waive any
election for Worker's Compensation Insurance coverage pursuant to MN Statue
s176.041 subd. (1a).

That in the event affiant employs any person or persons to perform
services for hire, affiant shall notify Washington County immediately and shall
immediately provide adequate evidence of Worker's Compensation coverage for
said employee(s) to Washington County.

FURTHER YOUR AFFIANT SAYETH NOT.

Date

Signature

Subscribed and sworn to before me
This _____ day of _____ 20____.

Notary Public