

Workers' Compensation Affidavit

I, _____, do solemnly swear that I will not employ/hire any other persons for the project for which I am seeking a permit(s).

After receipt of the permit(s) if I employ any other persons, I must notify the Borough office and provide proof of Workers' Compensation coverage within three business days.

I understand that failure to comply will result in a stop-work order and that such order may not be lifted until proper coverage is obtained, as provided by Section 302(e)(4) of the act of June 2, 1915 (P.L. 736), known as The Pennsylvania Workmens' Compensation Act, reenacted and amended June 21, 1939 and amended December 5, 1974 and amended July 2, 1993. (P.L.).

Signature of Permit Applicant

Commonwealth of Pennsylvania
County of Montgomery

Sworn and subscribed to me this
_____ day of _____, 20____
by _____

Notary Public

Commission Expires: _____