

CITY OF PHOENIX

SOLE PROPRIETOR WORKERS' COMPENSATION WAIVER

NOTE: THIS FORM IS TO BE USED ONLY BY THE CITY OF PHOENIX WHEN CONTRACTING WITH A SOLE PROPRIETOR THAT HAS NO EMPLOYEES. THIS FORM DOES NOT APPLY WHEN CONTRACTING WITH A CORPORATION, LIMITED LIABILITY COMPANY, PARTNERSHIP OR SOLE PROPRIETOR WITH EMPLOYEES.

The following is a written waiver under the compulsory Workers' Compensation laws of the State of Arizona, A.R.S. 23-901 (et. seq.), and specifically, A.R.S. 23-961(M), that provides that a Sole Proprietor may waive his / her rights to workers' compensation coverage and benefits.

I am a sole proprietor and I am doing business as _____ .
(name of sole proprietor's business)

I am performing work as an independent contractor for the City of Phoenix. I am not the employee of the City of Phoenix, for workers' compensation purposes, and, therefore, I am not entitled to workers' compensation benefits from the City of Phoenix. I understand that if I have any employees working for me, I must maintain workers' compensation insurance on them.

Sole Proprietor Address: _____

Signature of
Sole Proprietor: _____ Date _____

City Contract Number: _____
City of Phoenix Department: Human Services Department

THE SIGNED FORM WILL BE MAINTAINED IN THE CONTRACT FILE