

BOROUGH OF SOUTH GREENSBURG

WORKER'S 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.

After receipt of the permit, if I employ any other persons I must notify the Zoning Officer and provide proof of worker's compensation coverage within three (3) working 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 Workmen's Compensation Act, reenacted and amended June 21, 1939 and amended December 5, 1974 and amended July 2, 1993.

Signature of applicant

Address

City State Zip

Sworn to and subscribed before me this
____ day of _____, 20____.
My commission expires _____.

Signature of Notary Public