

Development Review Center 281 N. College Ave., Fort Collins, CO 80524 contractor\_licensing@fcgov.com 970.221.6760

## **Employee Affidavit**

Ι	as License Holder for	
	-	

(Company Name), City of Fort Collins License No.

hereby declare and attest to the following selected items:

- □ No employees The company does not have payroll employees that will be working on a job site(s) within the City of Fort Collins.
- □ Yes, employees The company does employ regulated payroll trade employees.
  - I understand that an employee is defined as a person who is supervised by the license and supervisor's certificate holder(s) and is eligible under Colorado's worker's compensation law, is personally paid an hourly wage or salary and is not paid through a contract or paid to a company name.
- □ I understand that paying or exchanging in-kind trade to any party to perform work who is not considered an "employee" by the above definition, or any party who is not considered an exempt specialized trade subcontractor constitutes a violation of the Code of the City of Fort Collins, if such party is not in possession of their own Fort Collins license.

I understand that failure to comply with any of the above conditions, or the submittal of inaccurate information, may result in revocation of the above-referenced license, revocation of any permits associated with the above license, and forfeiture of any fees that have been collected.

This form must be accurately completed and notarized upon submission.

License Holder

STATE OF	)
COUNTY OF	)SS)
The forego	ing Affidavit was acknowledged before me thisday of
by	
Witness m	y hand and official seal.
My Commi	ssion expires:

Notary Public