



# Town of Georgia

47 Town Common Road No. • Georgia, VT 05478 • Phone: 802-524-3524  
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To: **The Town of Georgia**, a Vermont Municipality:

## NON-EMPLOYEE WORK AGREEMENT

Undersigned, sole proprietor, or partner owner of an unincorporated business, of \_\_\_\_\_ (name of business),  
Of \_\_\_\_\_ (business address),

Hereby certify that I am aware of my right to purchase Workers' Compensation insurance and have elected, to purchase Workers' Compensation coverage as described below or not purchase Workers' Compensation insurance coverage.

Scope and dates of work to be performed:

\_\_\_\_\_  
\_\_\_\_\_

### Liability Hold-Harmless Agreement:

In consideration of the agreement of **the Town of Georgia** to engage my company and me to perform certain services for the Municipality, \_\_\_\_\_ (Company/Person) and I agree, for myself/ourselves and my/our heirs, executors and administrators agree to indemnify, defend and hold forever harmless **the Town of Georgia**, its officers, agents and employees from and against any and all claims, demands, liabilities, actions, judgments, settlements, damages, costs and expenses (including attorney's fees and disbursements) for injury to or death of any person, including myself, or damage to property arising out of or resulting from any material, product, equipment, vehicle or service supplied by the company or by me, or the agents, servants or employees of either, or from any action or failure to act on the part of myself or the company, or the agents, servants or employees of either, while performing services for , at the behest of, under contract with or on the premises of **the Town of Georgia**.

### Non-Employee Agreement:

Under 21 VSA SS 601 (14), sole proprietors and partner owners of an unincorporated business whose work: is distinct and separate from the municipality's work; who control the means and manner of the work performed; hold themselves out as in business for themselves; hold themselves out for work for the general public and do not perform work exclusively for or with another person; and are not treated by the municipality as an employee for purposes of income or employment taxation with regard to the work performed; are not considered worker or employees of the municipality.

☐ Undersigned, hereby attests I have procured Workers' Compensation Insurance Coverage from:  
Carrier: \_\_\_\_\_ Effective Dates: \_\_\_\_\_ to \_\_\_\_\_  
Limits of Liability: \_\_\_\_\_  
(Attach a valid Certificate of Insurance)

OR

☐ Undersigned, hereby attests that I am a sole proprietor, or a partner owner of an unincorporated business, and as such am not considered to be a worker or employee under the provisions of 21 VSA SS 601 (14).

I affirm that:

- I am not a worker for employee of The Town of Georgia;
- I am working independently;
- I have no employees; and
- I have not contracted with other independent contractors.
- I understand that I have the right to purchase Workers compensation insurance, and I have elected not to purchase Workers Compensation Insurance coverage.

**Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Witness:** \_\_\_\_\_

**Sign Name:** \_\_\_\_\_