

**STATE OF IDAHO CERTIFICATE OF VERIFICATION
OF WORKERS' COMPENSATION INSURANCE**

Read thoroughly before completing form.

WHAT ARE THE WORKERS' COMPENSATION REQUIREMENTS?

The Idaho Workers' Compensation Law requires that employers who hire one or more, either full or part-time employees, to perform work in the State of Idaho, carry workers' compensation insurance unless specifically exempted. *Failure to comply could result in monetary penalties as well as an injunction to prohibit the employer from operating the business. Failure to carry workers' compensation insurance for employees is a misdemeanor under Idaho Law.*

WHO MUST COMPLETE THIS FORM?

Any person, partnership, limited liability company, corporation or firm who is bidding on a contract for the United States Department of Agriculture/Forest Service (USFS) for work that is within the State of Idaho and who has been notified by the USFS that he/she/it has been selected for a USFS contract.

WHEN MUST THE FORM BE COMPLETED?

The form must be completed and forwarded to one of the Industrial Commission offices when you are notified by the USFS that you have been selected for a USFS contract. The approval of the Industrial Commission is required prior to the final award.

ADDITIONAL COMMENTS:

Failure to complete any part of the form that is applicable to your operations could result in a delay in processing.

If any of the work is to be performed by sub-contractors, each sub-contractor must obtain and complete a Certificate of Verification of Workers' Compensation Insurance.

If your business is a partnership, limited liability company or corporation, each partner/member/corporate officer must sign the form where designated.

You must submit a separate verification form for each contract awarded.

ONCE THE BIDDER HAS COMPLETED AND SIGNED THE FORM, FAX, MAIL OR DELIVER IT TO THE APPROPRIATE INDUSTRIAL COMMISSION OFFICE. IF YOU HAVE ANY QUESTIONS, CONTACT A COMPLIANCE REPRESENTATIVE AT ANY OF THE FOLLOWING OFFICES:

1111 Ironwood Street Suite A
COEUR D'ALENE ID 83814
(208) 769-1452 or FAX (208) 769-1465

847 Parckcenter Way Suite 7
NAMPA ID 83651
(208) 442-8341 or FAX (208) 442-8344

1070 Hiline Suite 300
POCATELLO ID 83201
(208) 236-6399 or FAX (208) 236-6040

1411 Falls Ave. East Suite 915
TWIN FALLS ID 83301
(208) 736-4700 or FAX (208) 736-3053

P.O. Box 83720
BOISE ID 83720-0041
(208) 334-6000 or 1-800-950-2110 or FAX (208) 334-5145