



Charlestown Township

4030 Whitehorse Road, P.O. Box 507, Devault, PA 19432

(610) 240-0326 Fax: (610) 240-0328

admin1@charlestown.pa.us

(This Form Requires a Notary Seal)

Property Owner's Affidavit of Exemption

The undersigned affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law because he/she is a property owner performing his/her own work.

If property owner does hire a contractor to perform any work pursuant to building permit, the contractor must provide proof of workers' compensation insurance to the municipality. Homeowner assumes liability for contractor compliance with this requirement.

Signature of Applicant

County of _____

Municipality of _____

Subscribed, sworn to and acknowledged before me

by the above _____

this _____ day of _____, 20__

SEAL

Notary Public