

**EXCEPTION TO WORKER'S COMPENSATION COVERAGE**

I, the undersigned, hereby affirm:

I certify that as the sole proprietor of \_\_\_\_\_, I elect to not come under Worker's Compensation Laws pursuant to the Labor Code Section 3700, and that as such \_\_\_\_\_ has no employees save for the sole proprietor of the Corporation. I acknowledge and certify this to be true by presenting this notarized document with signature to be included as part of the agreement for \_\_\_\_\_ services.

THAT I am the owner (sole proprietor) of \_\_\_\_\_, and;

THAT upon award of the contract to provide \_\_\_\_\_ services, all work shall be performed without exception, for the term of the contract, exclusively and solely by the undersigned sole proprietor of the Company, and;

THAT any deviation from this agreed upon practice shall constitute grounds for immediate termination of the Agreement between \_\_\_\_\_ and the City of Moreno Valley to provide \_\_\_\_\_ services and I agree to defend, indemnify, and hold harmless the City of Moreno Valley, the Moreno Valley Community Services District, and the Moreno Valley Redevelopment Agency against any and all claims, lawsuits, or other actions arising out of any deviation from this agreed upon practice.

I/We certify by my/our name affixed below under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Name, Title

**NOTARIZED BELOW**