

## Non-Service Agreement Contracts

### WAIVER DECLARATION OF INSURANCE REQUIREMENTS

	YES	NO (equals waiver)
<b>1. Workers Compensation:</b> Does the contractor have employees? If “YES”, then, WORKER’S COMPENSATION/EMPLOYER’S LIABILITY INSURANCE IS REQUIRED.		
<b>2. Owned Auto Insurance:</b> Will the contractor use any owned autos in the provision of direct services, such as transporting clients in autos or operating autos in performance of the work itself? If “YES”, then INSURANCE FOR OWNED AUTOS IS REQUIRED.		
<b>3. Hired Auto Insurance:</b> Will the contractor use any hired autos in the provision of direct services, such as transporting clients in autos or operating autos in performance of the work itself? If “YES”, then INSURANCE FOR HIRED AUTOS IS REQUIRED.		
<b>4. Non-owned Auto Insurance:</b> Will the contractor be using any non-owned autos in the provision of direct services, such as transporting clients in non-owned autos or operating non-owned autos in performance of the work itself? If “YES” then, INSURANCE FOR NON-OWNED AUTOS IS REQUIRED.		

***Where “NO” is indicated—this declaration by the contractor will serve as a waiver for the specified type(s) of insurance.***

\_\_\_\_\_  
Contractor’s Signature

\_\_\_\_\_  
Date

This form is to be used in contracts that will be authorized or executed by the Board of Supervisors. The form **must be** included in the contract behind the insurance exhibit.