



Note: This form is mandatory if contractor does *NOT* have general liability insurance and/or Workmen's Compensation.

Fund Years 20__ – 20__

The Undersigned, _____, stipulates and agrees that as to any work performed by the undersigned under agreement with Konrady's Lawn and Landscaping, Inc., the legal relationship of the undersigned shall be as an independent contractor.

The undersigned affirmatively represents that he has no employees and qualifies as an individual employer or self-employed person such that, unless an election is filed to come under the Kansas Workers Compensation Act, no workers compensation coverage is available through Konrady's Lawn and Landscaping, Inc.

The undersigned agrees to indemnify and hold harmless Konrady's Lawn and Landscaping, Inc. and/or the Kansas Building Industry Workers Compensation Fund for any expenses, indemnity, attorney fees or other costs to defend any worker's compensation action filed against Konrady's Lawn and Landscaping, Inc. by the undersigned or any employee claiming to work for the undersigned.

Should the undersigned wish to employ workers to perform any work which is the subject of an agreement between the undersigned and Konrady's Lawn and Landscaping, Inc., the undersigned accepts full responsibility for providing workers' compensation coverage for said employee(s) and shall provide Konrady's Lawn and Landscaping, Inc. sufficient proof of insurance prior to any work being performed and shall keep said insurance current.

Print Name _____

Signature _____ Date _____

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