## **SAUNDERS COUNTY PLANNING & ZONING**

## **Contractor Registration**

Date: \_\_\_\_\_

Company Name:			
Type of Work Performed:			
Address:			
City:	State:	Zip:	
Phone:	Email:		
Printed Name:	Signature:		

Saunders County Board of Supervisors annually requires a current copy of liability insurance, along with a check or money order for \$25.00 and one of the following to be submitted with this application:

1. A Certificate or policy of insurance written by an insurance carrier duly authorized to do business in this state which gives the effective dates of workers compensation insurance coverage indicating it is in force: or

2. A Certificate evidencing of self-insurance privileges as provided by the Nebraska Workers Compensation Court pursuant to Nebraska to Nebraska Revised Statutes Section 48-145: or 3. A signed statement indicating that the contractor is not required to carry Workers Compensation Insurance pursuant to the Nebraska Workers Compensation Act.

Make checks payable to:

## Saunders County Zoning

433 N. Chestnut St., Suite 302 Wahoo, NE 68066 (402) 443-8136