

Department of Labor and Industries
Employer Services
PO Box 44140
Olympia WA 98504-4140



CONSTRUCTION CONTRACTORS' APPLICATION FOR WORKERS' COMPENSATION ACCOUNT WITH NO WORKERS OR HOURS

To be used only when no workers will be employed nor hours/units reported

This form is to be used only when a construction contractor requires an active workers' compensation account but will not be hiring any workers and will not be reporting any hours/units to the department.

As the contractor, you must have a current UBI number. If you do not have a UBI number, please submit a Master Application by requesting one from us, or online at <http://www.dol.wa.gov/mls/buslic.htm>.

Please complete the information below and send this form to:

Department of Labor and Industries
Employer Services
PO Box 44140
Olympia WA 98504-4140

Business Information

Owner's Name:		Unified Business Identifier (UBI):	
Business Name:			
Business Address:			
City	State	ZIP	Business Phone Number

Physical Location

Physical Address			
City	State	ZIP	Business Phone Number

Nature of Business:

I certify I do not have nor do I plan to have employees. If at any time in the future I decide to hire employees, I will notify the department in writing. I also agree to regularly submit a quarterly report to the department showing no hours/units worked. The report will be submitted on or before the due date of each quarter.

Date	Title	Signature
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