

ENTITY: TOWN OF PLEASANT GARDEN

INDEPENDENT CONTRACTOR vs. EMPLOYEE CHECKLIST:

Whenever any public entity retains an independent contractor who does not carry workers' compensation insurance and the owner or an employee of that contractor is injured, a determination must be made as to whether the injured worker is truly an independent contractor or, in fact, is an employee of the public entity and, thereby, eligible for worker's compensation benefits through the entity. The NC Industrial Commission and NC Courts have used the following tests to make this determination. Please complete the information below for each independent contractor that has **NOT** provided you with a Certificate of Insurance for Workers Compensation (proof of Workers' Compensation policy).

Name of Independent Contractor: _____
(print your name)

Type of Work Performed: **Youth soccer program referee and/or line judge**

Type of Business: Individual Sole Proprietor Partnership LLC Incorporated.

Duration of Contract: **March 17 – October 20, 2018**

How many total employees does the contractor employ (excluding owner)? 0

Yes **No**

(a) Is the person employed engaged in an independent business or occupation? **X**

(b) Does the person employed have a federal ID tax number? **X**

(c) Does the person employed perform similar work for any other business/individual? **X**

(d) Does the person employed have the freedom to use assistants/helpers as he/she may think proper? **X**

(e) Does the person employed have full control over such assistants/helpers? **NA**

(f) Does the person employed select his own time to perform work?
(for example, your entity does not tell the person to work specific hours during the day) **X**

(g) Does the person employed have the independent use of his special skill, knowledge, or training in the execution of the work? **X**

(h) Is the person employed paid for the job in a lump sum amount (not paid by the hour)? **X**

(i) Does the person employed have the freedom to use their method of doing the work rather than another and is not subject to discharge because they adopt one method over another method? **X**

(j) Is the person employed furnished tools or equipment owned by you? **X**

None of these factors is controlling, but each is to be considered in determining the relationship between the parties. The essential issue is whether the alleged employer has the right to control the method and means by which the "employee" performs their work. RMS will attempt to determine whether an employment relationship exists for **insurance purposes only**.

Signature of Contractor

Date