



CITY OF FULLERTON

Administrative Services Department

Administration (714) 738-6521
Fiscal Services (714) 738-6881
Information Technology (714) 738-6538
Purchasing (714) 738-6535

DECLARATION OF SOLE PROPRIETOR

_____, (hereinafter "VENDOR") hereby acknowledges and agrees that he/she/they are an independent contractor for the purposes of the California Workers' Compensation and Labor laws. All work/services will be performed personally and solely by owner(s). VENDOR will hire no employees for work/services required. If, however, VENDOR hires employees to perform the work/services or any portion thereof, VENDOR shall obtain Workers' Compensation Insurance and provide proof of Workers' Compensation Insurance coverage to the City of Fullerton. If VENDOR hires a subcontractor to perform the work/services or any portion thereof, and the subcontractor has employees, VENDOR shall require the subcontractor to obtain Workers' Compensation Insurance for that subcontractor's employees.

VENDOR shall defend, indemnify and hold harmless the City of Fullerton from any and all claims and liability, including Workers' Compensation claims and liability that may be asserted or established by any party in the event VENDOR hires an employee in violation of this declaration, and VENDOR will further indemnify the City of Fullerton for all damage the City thereby suffers.

ACKNOWLEDGED AND AGREED THIS ____ DAY OF _____, ____ IN _____, CALIFORNIA.

Signature of Owner or Legal Agent of Vendor

