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Certificate of Compliance Minnesota Workers' Compensation Law

This form must be completed by the business license applicant.

Print in ink or type

Minnesota Statutes § 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minn. Stat. chapter 176. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

A valid workers' compensation policy must be kept in effect at all times by employers as required by law.

License or certificate number (if applicable)	Business telephone number	Alternate telephone number
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Business name (Provide the legal name of the business entity. If the business is a sole proprietor or partnership, provide the owner's name(s), for example John Doe, or John Doe and Jane Doe.)

DBA ("doing business as" or "also known as" an assumed name), if applicable

Business address (must be physical street address, no P.O. boxes)	City	State	ZIP code
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County	Email address
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You must complete number 1 or 2 below.

Note: You must resubmit this form to the authority issuing your license if any of the information you have provided changes.

1. ☐ I have a workers' compensation insurance policy.

Insurance company name (not the insurance agent)

Policy number	Effective date	Expiration date
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☐ I am self-insured for workers' compensation. (Attach a copy of the authorization to self-insure from the Minnesota Department of Commerce.)

2. I am not required to have workers' compensation insurance because:

☐ I only use independent contractors and do not have employees. (See [Minn. Stat. § 176.043](#) for trucking and messenger courier industries; [Minn. Stat. § 181.723, subd. 4](#), for building construction; and [Minnesota Rules chapter 5224](#) for other industries.)

☐ I do not use independent contractors and have no employees. (See [Minn. Stat. § 176.011, subd. 9](#), for the definition of an employee.)

☐ I use independent contractors and I have employees who are not required to be covered by the workers' compensation law. (Explain below.)

☐ I only have employees who are not required to be covered by the workers' compensation law. (Explain below.) (See [Minn. Stat. § 176.041](#) for a list of excluded employees.)

Explain why your employees are not required to be covered

I certify the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify I am authorized to sign on behalf of the business.

Print name

Applicant signature (required)	Title	Date
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If you have questions about completing this form or to request this form in Braille, large print or audio.

Certificate of Compliance MN Workers' Compensation Law 4.20.2023

Mn Work Comp Report Work Ability

DP Hallahan



Mn Work Comp Report Work Ability:

Reviewing **Mn Work Comp Report Work Ability**: Unlocking the Spellbinding Force of Linguistics

In a fast-paced world fueled by information and interconnectivity, the spellbinding force of linguistics has acquired newfound prominence. Its capacity to evoke emotions, stimulate contemplation, and stimulate metamorphosis is really astonishing. Within the pages of "**Mn Work Comp Report Work Ability**," an enthralling opus penned by a highly acclaimed wordsmith, readers attempt an immersive expedition to unravel the intricate significance of language and its indelible imprint on our lives. Throughout this assessment, we shall delve into the book's central motifs, appraise its distinctive narrative style, and gauge its overarching influence on the minds of its readers.

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Table of Contents Mn Work Comp Report Work Ability

1. Understanding the eBook Mn Work Comp Report Work Ability
 - The Rise of Digital Reading Mn Work Comp Report Work Ability
 - Advantages of eBooks Over Traditional Books
2. Identifying Mn Work Comp Report Work Ability
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Mn Work Comp Report Work Ability
 - User-Friendly Interface
4. Exploring eBook Recommendations from Mn Work Comp Report Work Ability
 - Personalized Recommendations
 - Mn Work Comp Report Work Ability User Reviews and Ratings
 - Mn Work Comp Report Work Ability and Bestseller Lists

5. Accessing Mn Work Comp Report Work Ability Free and Paid eBooks
 - Mn Work Comp Report Work Ability Public Domain eBooks
 - Mn Work Comp Report Work Ability eBook Subscription Services
 - Mn Work Comp Report Work Ability Budget-Friendly Options
6. Navigating Mn Work Comp Report Work Ability eBook Formats
 - ePub, PDF, MOBI, and More
 - Mn Work Comp Report Work Ability Compatibility with Devices
 - Mn Work Comp Report Work Ability Enhanced eBook Features
7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Mn Work Comp Report Work Ability
 - Highlighting and Note-Taking Mn Work Comp Report Work Ability
 - Interactive Elements Mn Work Comp Report Work Ability
8. Staying Engaged with Mn Work Comp Report Work Ability
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Mn Work Comp Report Work Ability
9. Balancing eBooks and Physical Books Mn Work Comp Report Work Ability
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Mn Work Comp Report Work Ability
10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
11. Cultivating a Reading Routine Mn Work Comp Report Work Ability
 - Setting Reading Goals Mn Work Comp Report Work Ability
 - Carving Out Dedicated Reading Time
12. Sourcing Reliable Information of Mn Work Comp Report Work Ability
 - Fact-Checking eBook Content of Mn Work Comp Report Work Ability
 - Distinguishing Credible Sources
13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks

14. Embracing eBook Trends

- Integration of Multimedia Elements
- Interactive and Gamified eBooks

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