

Who may complete this form?

- one partner of a partnership,
- one executive officer of a corporation with workers, or
- one executive officer of a corporation without workers but with multiple executive officers.

Account Number	Firm Number
Employer's Legal Name (Legal Entity)	
Telephone Enquiry Number 416-344-1000 or 1-800-387-0750	

Under the Workplace Safety and Insurance Act, 1997 (WSIA), compulsory coverage extends to independent operators, sole proprietors, partners and executive officers in the construction industry, with certain exemptions.

Criteria for Exemption

- The individual must be a partner or executive officer. (This would not apply to an independent operator or sole proprietor with workers), and
- **The partner or executive officer does not engage in ANY construction work***, and
- They do not engage in any construction work during the **calendar year**.

Construction means any of the industries listed under Class G construction of the WSIB Employer Classification Manual.

Construction work refers to any manual work of a skilled or unskilled nature, the operation of equipment or machinery, or the direct on-site supervision of workers. Periodic site visits are permitted provided the partner or executive officer is not performing construction work on the site

Executive Officer Status

An Executive Officer for a company is commonly known as President, Vice-President, Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, or Secretary/Treasurer (among other names for officers). An Executive Officer is enumerated, appointed or empowered through corporate documents such as Articles of Incorporation, Charters, by-laws and/or corporate profile reports filed with a federal or provincial agency to act as an officer. The appointment of an Executive Officer should be recorded in the corporate minute book.

The key to Executive Officer status is not title alone but also that the person is empowered or appointed to act as an officer of the organization.

The WSIB reserves the right to determine who is an Executive Officer by reviewing the individual's roles, responsibilities and authority within the organization.

Important consideration:

The individual whose declaration for exemption is **approved**, is no longer covered under the *Workplace Safety and Insurance Act, 1997 (WSIA)* and will not receive benefits or services in the event of a work related injury or illness while the exemption is in effect.

How to Request an Exemption

To request exemption from compulsory coverage, please print this form. Complete the declaration on page 2 and send to the WSIB.

Employer's Legal Name (Legal Entity)	Account No.
--------------------------------------	-------------

Declaration for Exemption from Compulsory Coverage in Construction

Please read the following information carefully before completing the form. It explains how exemption from compulsory coverage changes your status under the Workplace Safety and Insurance Act, 1997 (WSIA).

Partner or Executive Officer Requesting Exemption

I certify that I do not perform any construction work as defined on page 1; that I am a partner or executive officer; that this declaration form is being filed to exempt me from WSIB coverage; and the information provided below is true.

I am aware and understand that:

1. I am voluntarily requesting an exemption from compulsory WSIB coverage.
2. Once exempt from coverage I will not be eligible for benefits under the WSIA in the event of an injury or occupational disease arising out of and in the course of employment.
3. If I engage in any construction work, or there is a material change in circumstances in connection with this exemption, the partnership or corporation must notify the WSIB within 10 days after the material change occurs.
4. The WSIB may request proof of ownership or executive officer status at any time.
5. If the WSIB discovers that I did not qualify for the exemption, a premium adjustment may be made to the employer's account.
6. The WSIB has the right to determine if I qualify as a partner or executive officer, and if I meet the criteria for exemption.
7. The partnership or corporation is required to report the insurable earnings and pay premiums for all non-exempt partners or executive officers.
8. It is an offence to deliberately make false statements to the WSIB.
9. The exemption takes effect the day this declaration is received by the WSIB. My employer and I will receive confirmation of the exemption and the effective date from the WSIB.
10. The exemption remains in effect until the WSIB receives a written requested to cancel it.

Partner or Executive Officer Requesting Exemption (COMPLETE ALL SECTIONS BELOW)

By signing this declaration form, I confirm that I wish to be exempt from coverage under the *Workplace Safety and Insurance Act, 1997(WSIA)* in the event of an injury or occupational disease arising out of and in the course of employment.

Is this declaration form being completed to change a previously exempted partner or executive officer?		<input type="checkbox"/> yes	<input type="checkbox"/> no
First Name (print)	Last Name (print)	Title (print)	
Signature	Telephone	Date Completed (dd/mm/yyyy)	

Personal information on this form is collected under the authority of the WSIA to administer and enforce the WSIA. It is an offence to deliberately make false statements to the WSIB. If you have any questions, please call 416-344-1000 or 1-800-387-0750.

For internal use only

Date Received by WSIB