PIKES PEAK REGIONAL BUILDING DEPARTMENT

LETTER TO EXEMPT

Contractor I.D.# _____

Dear Sir or Madam:

My Company _____

Is a ( ) Sole Proprietorship
( ) Partnership
( ) Corporation
( ) LLC

And we have no employees, which makes us exempt from workers compensation insurance according to Section RBC201.7.1 of the 2005 Pikes Peak Regional Building Code.

Attest: _____ _____
Examinee or Officer Signature *Date*
(Before a Notary Public if not signing in person)

State of _____)
)
County of _____)

The foregoing instrument was acknowledged before by

_____on _____ .
[name] [date]

Witness my hand and official seal

My commission expires: _____

_____
Notary Public