

Independent Contractor Qualifications Form

As part of the contracting process with Worksystems Inc., all Contractors are required to enter into a written agreement to memorialize the engagement and to represent and warrant to Worksystems Inc. that they are engaged in an independently established business providing the same or similar services to the services provided to Worksystems Inc.; that they market their business and have clients in addition to Worksystems Inc.; and that they are solely responsible for maintaining all licenses and paying all fees and taxes required in the State of Oregon (or another state where they are located, if applicable) for the operation of such business. Any and all personnel performing services for the Contractor are not considered to be an agent or employee of Worksystems Inc. and shall be free from direction and control by Worksystems Inc. over the means and manner of providing such services, subject only to the right of Worksystems Inc. to specify the desired results.

Please verify that your business satisfies three or more of the following criteria and confirm that the services will be primarily performed from an independent business location and that the business qualifies as an Independent Contractor under all applicable federal and state laws (check all applicable boxes and complete the bottom of the form):

the	bottom of the form):
	The undersigned business is a properly registered (and licensed, if applicable) business providing the services that I will be providing to Worksystems Inc. This means the business (whether an LLC, Corporation or Sole Proprietorship) is registered with the Oregon Secretary of State (or the state where your business is located if other than Oregon) and has satisfied any applicable local business registration requirements. For example, businesses located in Portland and/or Multnomah County must register and pay associated business taxes here: https://www.portland.gov/revenue/business-tax ;
	The business has the necessary staff, tools and equipment needed to perform the services;
	The business bears risk of loss related to the services to be performed, as demonstrated by one or more of the following: (A) this will be a fixed price contract; (B) defective work will be corrected by the business at no additional charge; and/or (C) we warranty the services provided;
	The business maintains its own liability insurance, and all required insurance associated with the provision of services, including without limitation workers compensation insurance for all personnel, unless they are exempt (for example, owners);
	The business provides contracted services for two or more different persons, organizations, and or companies within a 12-month period, or routinely engages in business advertising, solicitation or other marketing efforts reasonably calculated to obtain new contracts to provide similar services; OR
	Any personnel performing the services are either owners or employees, and exercises exclusive control over the work performed by its personnel;
	AND
	The services will be primarily performed from an independent business location: (A) that is separate from the business or work location of Worksystems; or (B) that is in a portion of my residence and that portion is used primarily for the business.
	AND
	The business otherwise qualifies as an Independent Contractor under all applicable federal and state laws.
Na	me of Business:
Na	me/Title of Representative:
Sig	nature Date