CORPORATE OFFICER EXCLUSION FORM

Revised 2/2021

TO BE COMPLETED BY CORPORATE OFFICERS/DIRECTORS

NOTICE: Corporations that have no employees except Directors and Officers, who do not subcontract our their work, and do not carry workers' compensation insurance coverage may file this form with the Industrial Accidents Division to affirm their exclusion from workers' compensation benefits. *Note that this form only applies to corporations, not LLCs or LLPs. Members of those entities do not need to complete this form.*

Per Utah Code 43A-2-104(4)(c) a corporation may exclude no more than five individuals who are directors or officers.

BUSINESS INFORMATION

Corporation Name: FEIN:

Mailing Address:

City: State: Zip:

Physical Address:

City: State: Zip:

Primary Contact:

Primary Contact Phone:

Primary Contact Email:

Officers/Directors to Be Excluded

Name/Title:	Signature:
Name/Title:	Signature:
Name/Title:	Signature:
Name/Title:	Signature:
Name/Title:	Signature:

UTAH LABOR COMMISSION
Industrial Accidents Division

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