

ATTACHMENT F
Independent Contractor Certification Statement

This form must be completed if one person will perform all of the contracted work.

CONTRACTOR CERTIFICATION. (MUST BE COMPLETED by Contractor)

I certify that I am independently employed in accordance with federal and state law, including ORS 670.600, and that the following statements are true and correct:

1. If providing services requiring licenses or certifications, I have current and valid licenses or certificates required to provide the services, and I am licensed under ORS Chapter 671 or 701, if necessary.
2. I maintain an independently established business and three (3) or more of the following statements are true:
 - A. My business is operated or headquartered at a separate location from the University (separate locations can include another university). If that location is in a portion of my house, that portion of my house is used primarily for my business.
 - B. I engage in at least one of the following activities:
 - I have provided these services for at least two different clients (this can include the University) within the past year; **OR**
 - I advertise or market the same or similar services that I will perform for the University to promote my business and get new clients.
 - C. I supply all of my own tools to perform the services.
 - D. I have the right to hire employees, at my own expense, to help me perform these services for the University. (I may also choose not to use this right).
 - E. My clients are not responsible for providing me with additional compensation if my costs or losses exceed the amount I am paid for my services. At least one of the following must be true:
 - I enter into fixed price contracts.
 - I negotiate indemnification agreements or purchase liability insurance, performance bonds, or “errors and omissions” insurance.
 - I guarantee or provide a warranty for the services I provide.
 - I am required by contract to correct any defective work I perform.

By signing below, I certify that **Section 1** is true, and three (3) or more of the above statements in **Section 2** are true.

Contractor Signature: _____ Date: _____

For more information about answering these questions and how UO determines independent contractor status, please feel free to contact Purchasing and Contracting Services at UOP2help@uoregon.edu.