

**State of New York
WORKERS' COMPENSATION BOARD**

**NOTICE OF ELECTION OF A CORPORATION WHICH IS REQUIRED TO HAVE COVERAGE FOR ITS
EMPLOYEES UNDER THE NEW YORK STATE WORKERS' COMPENSATION LAW TO EXCLUDE THE
SOLE SHAREHOLDER-OFFICER OR ONE OF THE TWO OR BOTH EXECUTIVE
OFFICERS-SHAREHOLDERS OF THE CORPORATION FROM SUCH COVERAGE**

To: Empire State Agricultural Compensation Trust (EMPACT)
Agri-Services Agency, LLC
P.O. Box 4910
Syracuse, New York 13221-8920

TAKE NOTICE that under the provisions of Section 54, subdivision 6, of the Workers' Compensation Law as amended, the corporation named below elects to exclude the executive officer(s) named below from coverage under the New York State Workers' Compensation Law with respect to all the policies issued to the corporation by the insurance carrier named above.

Name of Corporation _____

Address of Corporation _____

Incorporated Under the Laws of the State of _____

Type: One-person corp. Two-person corp. (A two-person corporation may elect to exclude one or both executive officers, provided that between them they own all the stock in the corporation, and that each officer owns at least one share of stock.)

Executive Officer(s) to be Excluded from Policy
1. Name _____ Title _____
2. Name _____ Title _____

CERTIFICATION

USE FOR ONE-PERSON CORPORATION

I, _____, certify that I am the sole executive officer of the above-named corporation; that I
Name
have been since _____ the sole owner of all issued and outstanding stock of the corporation and hold all the offices
Date
pursuant to paragraph (e) of Section 715 of the Business Corporation Law. (Affix corporate seal below, if you have one.)

Signature of Officer

Date

Telephone No.

USE FOR TWO-PERSON CORPORATION

We, _____, _____ and _____,
Name Title Name
_____ certify that we are the two executive officers of the above-named corporation, having been
Title
duly appointed by corporate resolution; that we have been since _____ the sole owners of all issued and outstanding
Date
stock and that each of us owns at least one share of stock of the corporation, and that we hold all of the offices pursuant to
paragraph (e) of Section 715 of the Business Corporation Law. (Affix corporate seal below, if you have one.)

Signature of Officer

Date

Telephone No.

Signature of Officer

Date

Telephone No.

**THIS ELECTION IS FINAL AND BINDING
UPON THE OFFICER(S) NAMED UNTIL
REVOKED BY THE CORPORATION.**

**CORPORATE
SEAL***

See reverse side for relevant portions of Sec. 54, subd. 6 (WCL)
and Sec. 715, Par. (e) of the Business Corporation Law.

*If the corporation does not
have a seal, check here