## **Employee Leasing Checklist**

Send complete packet to: Attention: Debbie Field Department of Labor 95 Pleasant Street Concord, NH 03301

Wl	hen filing the Employee Leasing Application, please include the following:		
	Completed and signed application form		
	A description of the business conducted		
☐ Criminal Record Release Authorization Forms for each individual in paragraph 2 of			
	application		
	<ul> <li>The forms and fees must be included with the leasing application when submitted</li> <li>You can download the form from the Department of Safety website at:</li> </ul>		
	https://www.nh.gov/safety/divisions/nhsp/jib/crimrecords/index.html		
	Person to receive the records: "Debbie Field"		
_	➤ Make checks payable to: "State of NH – Criminal Records"		
	A document signed by the parent company agreeing and guaranteeing the direct payment of benefits if the applicant fails or defaults in its obligation to do so. (Subsidiaries only)		
	A copy of the applicant's workers' compensation policy covering all leased employees of the applicant		
	A list of clients with their name, business address, FEIN, number of employees in NH and name of workers' compensation carrier		
	Evidence satisfactory to the commissioner that any health insurance benefits covering leased employees are provided pursuant to provisions of RSA 277-B:11, II (Example:		
	Letter stating where health insurance is provide and who the carrier is)		
	An audited financial statement prepared by an independent Certified Public Accountant		
	in accordance with generally accepted account principles within twelve (12) months prior to the date of application which statement shall show a minimum working capital of		
	\$100,000 per RSA 277-B:6, I		
	Quarterly Tax Certification from a Certified Public Accountant per RSA 277-B:6,III (Renewals only)		
	A copy of the employee manual provided to the leased employee outlining the terms and conditions of employment with the leasing company per RSA 277-B:9, I(i)		
	Confirmation from home state, if other than NH, that the leasing company is in good standing		
	A copy of the applicant's license issued by its State of domicile or a letter stating the state does not issue license, if the applicant is not a NH resident or domiciliary		
	A letter signed by the principle on the application certifying that the applicant does not conduct a temporary help service through the same entity as the applicant's employee leasing company		
	Letter of Good Standing from the NH Department of Employment Security		
	Letter of Good Standing from the NH Department of Revenue regarding Business Profit		
_	Tax		
U	A Surety bond in the sum of \$100,000		

☐ Any open or unpaid Civil Penalties or violations with Coverage Unit or Inspections

## Fees:

Payments sha	ll be made payable to: "Treasurer, State of New Hampshire"
☐ Fee ap ☐ Fees a ☐ \$100 l ☐ Licen	plicable to initial and renewal applications re non-refundable Filing Fee
	For Department of Labor Use  Date Received Application Date Reviewed Application Date Approved

License Number