

Employee Leasing Checklist

Note: Some documents involving other agencies may take more time to be obtained.

Send complete packet to:
Attention: Caroline Kelly
New Hampshire Department of Labor
95 Pleasant Street
Concord, NH 03301

When filing the Employee Leasing Application, please include the following:

- Completed and signed application form
- Proof of Applicant's Workers' Compensation policy in Question 1 covering all leased employees of the applicant per RSA 281 A-5
- A copy of the applicant's employee license or registration issued by its State of domicile. Certificate or letter of good standing is sufficient if no license or registration is issued by that state.
- Written safety summary form on file with the Department of Labor required by RSA 281-A64:II if applicant is domiciled in the State of NH. A written safety summary form must be completed and submitted with the application if there is no form on file. [Safety Summary Form Online Process | Forms and Publications | NH Department of Labor](#)
- Criminal Record Release Authorization Forms for each individual in Question 4 of the application.
 - Please see information on how to complete and submit the criminal background checks at [Criminal History Record Requests | NH State Police](#)
 - Applicants may also send completed criminal record release authorization forms to us with \$25.00 checks for each individual in question 4. We will send the forms and checks to the Department of Safety through interoffice mail.
- Description of any additional businesses operated by the individuals identified in Question 4 of the application within the five years prior to the date of this application.
- If the applicant has leasing clients in NH, please provide a list of clients with their name, business address, FEIN, number of employees in NH, date they became a client, and name of workers' compensation carrier
- A copy of the employee manual that notifies all leased employees they are leased employees per RSA 277-B:9, I(i)
- A copy of applicant leasing company's employee grievance system
- 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 provided and who the carrier is)
- Leasing Parent Company Agreement filled out and signed. (Subsidiaries only)
- 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
- All additional licenses issued by a State or Federal Agency relative to the applicant's operations
- Most recent audited financial statement prepared by an independent Certified Public Accountant for an audit performed no more than thirteen (13) months before the date of application or renewal which statement shall show a minimum working capital of \$100,000 per RSA 277-B:6, I

- 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 or comingle funds with a temporary help service operated through an associated entity per RSA 277-B:5, VI

Fees:

Payments shall be made payable to: “Treasurer, State of New Hampshire”

- Fee applicable to initial and renewal applications
- Fees are non-refundable
- \$100 Filing Fee**
- License Fee**
 - One year License Fee
 - ↪ If domiciled in New Hampshire: \$500
 - ↪ If not domiciled in New Hampshire: \$500 or the amount required by the domiciliary state, whichever is greater
 - Two-year Licenses Fee
 - ↪ Only available for renewal applications after five years or more of being licensed in NH
 - ↪ If domiciled in New Hampshire: \$1,000
 - ↪ If not domiciled in New Hampshire: \$1,000 or the amount required by the domiciliary state, whichever is greater

For Department of Labor Use	
Date Received Application	_____
Date Reviewed Application	_____
Date Approved	_____
License Number	_____