

IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTANA

Petitioner)	
)	
vs.)	WCC No. _____
)	
INDEPENDENT CONTRACTOR CENTRAL UNIT)	PETITION DISPUTING ICCU REVOCATION OF INDEPENDENT
)	CONTRACTOR EXEMPTION
Respondent.)	CERTIFICATE
)	

1. On _____, I received an independent contractor exemption certificate. A copy of the certificate is attached.

2. My exemption was revoked on _____. A copy of the revocation notice is attached.

3. The mediation process before the Department of Labor and Industry has been completed. § 39-71-415, MCA.

4. The following is a list of individuals who I may call as witnesses in this matter:

<u>Name and Address</u>	<u>General Subject Matter of Testimony</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

5. The following is a list of written documents relating to this case which I may introduce as evidence:

6. I am appealing the revocation and request the Workers' Compensation Court to determine that I am an independent contractor entitled to an independent contractor exemption.

DATED this _____ day of _____, 20__.

Petitioner's Signature

Please print or type: Name:

Mailing Address:

City, State, Zip:

Telephone #:

E-Mail Address:

Attach copies of application for Independent Contractor Exemption Certificate and revocation notice.