

**SELF-EMPLOYED INDIVIDUAL AFFIDAVIT**

I, \_\_\_\_\_ , being first duly sworn, depose and say for the  
(Name of Group Official)  
purposes of obtaining insurance coverage with Medical Mutual of Ohio® ("MMO").

1. I am the \_\_\_\_\_ for \_\_\_\_\_ ("Group").  
(Title) (Name of Group)

I am an authorized representative of the Group and have full power and authority to act on behalf of Group and legally bind it.

2. The Group is an organization duly organized and licensed to conduct business in the State of Ohio and is not a hobby under IRS regulations.
3. The Group was not organized or created for the purpose of obtaining insurance.
4. The Group's business provides a product or service that is available to the public.
5. To be considered full-time employees, Group members must work the following minimum number of hours per week: \_\_\_\_\_ (i.e., 20 Hours)
6. I understand and acknowledge that I am familiar with the Underwriting Regulations for group members and that any insurance coverage for my Group is subject to compliance with said Regulations.

**Affidavit Worksheet to determine Self-Employed Individual Status**

Does your business have a physical location separate from your home address?  
 Yes or  No

Does your business have a website?  Yes or  No

If yes, please provide the URL for your website: \_\_\_\_\_

How do you market your product /service? Please check all that apply:

- Internet advertising
- Social media sites (i.e., Facebook)
- Print publications (i.e. newspapers, magazines)
- Other: \_\_\_\_\_

If you haven't turned in any tax documents, how will you be filing your taxes as a self-employed individual?

When will be the first time you file taxes for the business? \_\_\_\_\_

If available, please provide a copy of your prior group insurance carrier invoice.

What records can you provide that show proof of income for this business? \_\_\_\_\_

Does your annual revenue meet or exceed 40 weeks per year X minimum hours per week to be considered full-time for this business X minimum wage?

E.g., 40 weeks per year X 30 hours per week X \$10.10 per hour = \$12,120

What is your estimated annual profit for this business? \_\_\_\_\_

Do you have a business bank account?  Yes or  No

What certificates/licenses/permit do you have that are required by your business?

Do you own any patents or copyrights or trademarks related to your business?  
 Yes or  No

What type of liability insurance coverage do you have, if any? \_\_\_\_\_

Could you provide any other documentation that proves this is a full-time business?  
 Yes or  No

