



Host Service Location (HSL) Annual Affidavit

IATA Numeric Code: _____

Before me the undersigned authorities, personally appeared and after being duly sworn did depose and say:

1. I am _____ (*Name of Independent Contractor Employee*), an employee of _____ (*Name of Independent Contractor Business*), located at _____ (*Address of Independent Contractor Business*). I certify that I work at the location full-time, dedicated 100% to its travel business.

Signature of Agent: _____

I am _____ (*Name of Independent Contractor Employee*), an employee of _____ (*Name of Independent Contractor Business*), located at _____ (*Address of Independent Contractor Business*). I certify that I work at the location full-time, dedicated 100% to its travel business.

Signature of Agent: _____

I am _____ (*Name of Independent Contractor Employee*), an employee of _____ (*Name of Independent Contractor Business*), located at _____ (*Address of Independent Contractor Business*). I certify that I work at the location full-time, dedicated 100% to its travel business.

Signature of Agent: _____

I am _____ (*Name of Independent Contractor Employee*), an employee of _____ (*Name of Independent Contractor Business*), located at _____ (*Address of Independent Contractor Business*). I certify that I work at the location full-time, dedicated 100% to its travel business.

Signature of Agent: _____

I am _____ (*Name of Independent Contractor Employee*), an employee of _____ (*Name of Independent Contractor Business*), located at _____ (*Address of Independent Contractor Business*). I certify that I work at the location full-time, dedicated 100% to its travel business.

Signature of Agent: _____



2. I am an official (Owner, President, Vice President, etc) of _____
(*Name of Independent Contractor Business*). I have reached the age of majority and certify that the facts stated in 1 above are true.
3. I am an official (Owner, President, Vice President, etc) of _____
(*Name of Independent Contractor Business*). I have reached the age of majority and certify that the facts stated in 1 and 2 above are true.
4. I have read the foregoing Affidavit, and to the best of my knowledge it is true and correct.

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____

Host Service Location (HSL) Official

Independent Contractor (ICB) Official

Notary Public

State of _____, in the country of _____ on _____ day, of the _____ month, in the year of _____, (name) _____ appeared before me and stated that he/she is the (owner/title) _____ of (name of organization) _____ and that the information provided on this form is true and correct. My commission expires on (date): _____ Notary Public: _____