

Appendix A-1: Services – Payment Instructions & Declaration

If you are eligible for payment, UBC requires documentation of your Social Insurance Number, Business Number or GST/HST number to process payments and comply with Canada Revenue Agency requirements.

Payee: Please complete **ONE** of the following three categories – A, B, or C.

A. Individual (all fields required)

Surname: _____ Given name(s): _____ WCB: _____

Email: _____ Home address: _____

Social Insurance Number: _____

I declare that this payment represents only incidental income for me, and is not my primary source of income. I am not employed by UBC for the scope of this work, and I am employed elsewhere or self-employed. I understand that payment for this service will be made as a one-time lump sum payment and that no deductions will be made for Employment Insurance, Canada Pension Plan or Income Tax.

B. UBC Faculty or Staff Member (all fields required)

Note: Only use this section if you are receiving regular bi-monthly salary deposits through UBC Payroll. Payment for your services will be processed through UBC Payroll and will appear on your pay stub as 'HON'.

Surname: _____ Given name(s): _____

Employee ID: _____ Social Insurance Number: _____

Faculty or Staff (Current): _____ Job Title: _____

How is the work different than your regular employee functions at UBC?

C. Corporation (all fields required)

Note: UBC requires that you attach your INVOICE if this section is completed. A **small supplier*** is currently defined by Canada Revenue Agency as a party whose total taxable revenues from all sources will not exceed \$30,000 in a single calendar quarter or in four consecutive calendar quarters. Taxable revenue do not include an individual's income from employment, or exempt services such as medical & dental. More information can be viewed on the CRA website. <http://www.cra-arc.gc.ca>

Company Name: _____

Payment Remittance Address: _____

This company: IS a *small supplier** and therefore has not registered for GST

IS NOT a *small supplier** with GST/HST # _____ (Business# is 9 digits+RT+4 digits)

D. Method of Payment

Note: UBC Business Terms are Net 45, or as agreed upon by Payment & Procurement Services

Direct Deposit: Choose one of: Direct Deposit Form Attached OR bank Details on File

Cheque

I declare that, to the best of my knowledge, all of the above information is true and complete.

Payee Print Name: _____

Payee Signature: _____ Date: _____

For Faculty Use Only:

Amount of Payment: \$ _____ Speedchart: _____

Scope of Work (Services Required): _____ Date(s) of Service: _____

Faculty/Department Name: _____ Email address: _____

Contact Person: _____ Address: _____ Signature: _____

Independent Contractor vs. Employee

Assessment Tool for Administrators

This tool is intended to assist your assessment of whether a particular worker is an independent contractor or an employee. Answer "Yes" or "No" by marking an "X" in the appropriate box. If inapplicable, leave blank.

While every effort has been made to bolster confidence in this assessment, this tool is unable to provide certainty. Each question does not necessarily carry equal weight within such an assessment. For example, the presence of supervision will almost always indicate an employee relationship. However, the greater the score differential, the greater the confidence in the results. Make sure it is the score differential and not the scores you are considering (e.g. Independent Contractor: 15 Employee: 10 = Score Differential: 5)

Score Differential

- 15 or more - high level of confidence
- 10 to 14 - moderate to high level of confidence
- 0-9 - moderate to low level of confidence. Solicit assistance from an HR Advisor.

If you are unsure or have concerns, please contact your HR Advisor who will make the final decision. A list of HR Advisors is available here:

<http://www.hr.ubc.ca/administrators/contact/>.

If this is a matter involving a Faculty member, please contact the Faculty Relations Department at 604-827-1010.

It is strongly recommended that you read the companion memorandum "What's in a Name?" to fully understand the complexity and risks involved in making such assessments; in particular, the key differences illustrated on page 3.

QUESTIONS	YES	NO	COMMENTS
1 Does the agreement describe the worker as a contractor or consultant?			
2 Was the worker hired specifically to complete a particular project or task?			
3 Will the worker receive benefits from UBC?			
4 Is the worker required to wear a uniform provided by UBC?			
5 Does the worker use a vehicle provided by UBC?			
6 Is the worker provided with UBC business cards?			
7 Does the worker use tools, computers, or equipment provided by UBC?			
8 Is the worker provided with working space (office, etc) at UBC?			
9 Is the worker self-insured through WorksafeBC?			
10 Does UBC decide the worker's location or hours of work?			
11 Is time away from work (vacation, medical appts, etc) expected to be authorized by UBC?			
12 Is the worker free to work for others?			
13 Is the worker entitled to subcontract work to other workers?			
14 If so, does UBC need to approve of any subcontractors?			
15 If unable to work, does UBC arrange for a temporary replacement worker?			
16 Does the worker have the sole authority to hire UBC employees?			
17 Is a substantial amount of the worker's time per week devoted to UBC?			
18 Will the worker report either daily or semi-weekly to a UBC manager or supervisor?			
19 Is the worker actively supervised?			
20 Are the worker's tasks the same or similar as other UBC employee positions?			
21 Has the worker previously been an employee of the University?			
22 Is the worker a current employee of the University in another position?			
23 Does the worker submit invoices for payment?			
24 Would UBC reimburse the worker for valid work-related expense claims?			
25 Is the work a primary function within the department?			
26 Has the worker invested personal money into the work opportunity?			
27 Does the worker stand to gain profit or risk economic loss with the work opportunity?			
28 Is the worker incorporated and working through a registered corporation?			

Independent Contractor <hr style="border: none; border-top: 1px solid black;"/>	Employee <hr style="border: none; border-top: 1px solid black;"/>
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Name: _____

Signature: _____

Date: _____

Name: _____

Signature: _____

Date: _____

Assessment of :