



Cast & Crew

Washington Paid Family & Medical Leave – Waiver Request Form

Production Company & Project Name: _____

Employee Name: _____

This form acknowledges intent to waive out of the Washington Paid Family & Medical Leave Program for

_____ working for _____ on _____.

Beginning Jan. 1, 2019, nearly all employers in the state of Washington, including out-of-state employers with Washington employees, are required to participate in the Washington Paid Family & Medical Leave Program (“PFML”). Out-of-state employers may file for conditional waiver from the Program on behalf of employees working in Washington state when all of the following conditions are true:

- The employee generally works outside of Washington state; **and**
- The employee is working in Washington state on a temporary work schedule; **and**
- The employee is not expected to work in Washington state for 820 hours or more in the qualifying period (the first four of the last five completed calendar quarters or the last four completed calendar quarters)¹

Employers and employees whose waiver is approved by the Washington Employment Security Department will not be required to pay into the PFML program, and employees will not be eligible to receive benefits under the program.

By signing the below, you are verifying your good-faith belief that _____ meets the conditions listed above for work performed for _____ on _____ and is eligible for waiver from the PFML Program. By signing below, you are authorizing Cast & Crew to rely on your representation in processing payroll for EMPLOYEE NAME engaged on this project while working in Washington state.

Please sign and complete this form and return it to the Cast & Crew Production Employee Help Desk at email: employeehelpdesk@castandcrew.com or fax: (818) 492-4722.

Production Signing Authority (Name & Title): _____

Production Signing Authority Contact Info (Email): _____

Production Signing Authority Signature: _____

Employee Name: _____

Employee Contact Info (Email): _____

Employee Signature: _____

If you have questions about how to fill out this form, please email employeehelpdesk@castandcrew.com. This form and additional information about how Cast & Crew is administering the PFML Program is available on the Cast & Crew [website](#). Additional information about the PFML Program is also available on the Washington Employment Security Department [website](#).

¹ Eligibility is assessed across all payroll processed through Cast & Crew and is not limited by production company or project.