



DO NOT SEND TO
IRS - SUBMIT
FORM TO
REQUESTING
AGENCY

FCD 04/2016

PART I: VENDOR INFORMATION

1. Legal Business Name: (As it appears on the IRS Income Tax return IRS EIN records, CP575, 147C - or - Social Security Administration records, Social Security Card, certified Form SSA7028) *REQUIRED	2. If you use a DBA/Trade Name, please list below:
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3. Entity Type (Check only one),

<input type="checkbox"/> Individual / Sole Proprietor or single-member LLC	<input type="checkbox"/> Government (Local, State, Federal)
<input type="checkbox"/> C Corporation	<input type="checkbox"/> Tax-Exempt organization under IRC Section 501 C _____
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Limited liability company. Enter tax classification (C=Corporation, S=S corporation, P=partnership) <input style="width:50px" type="text"/>
<input type="checkbox"/> Partnership	
<input type="checkbox"/> Trust/estate	*REQUIRED

4. 1099 Reporting: Services provided to the Board of County Commissioners Leon County by vendor:

<input type="checkbox"/> Health care or medical service	<input type="checkbox"/> Royalties
<input type="checkbox"/> Legal or attorney services	<input type="checkbox"/> Other _____
<input type="checkbox"/> Rental of Real Property	

*REQUIRED

PART II: TAXPAYER IDENTIFICATION NUMBER (TIN) & TAXPAYER IDENTIFICATION TYPE

1. Enter your TIN here (DO NOT USE DASHES)

2. Taxpayer Identification Type (check appropriate box):

<input type="checkbox"/> Employer ID No. (EIN)	<input type="checkbox"/> Social Security No. (SSN)	<input type="checkbox"/> N/A (Non United States Business Entity) <input type="checkbox"/>
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*REQUIRED

PART III: ADDRESS

1. Address: *REQUIRED Address Line #1 Address Line #2 Address Line #3 City State Zip + 4 Code	2. Remittance Address, IF DIFFERENT: Address Line #1 Address Line #2 Address Line #3 City State Zip + 4 Code
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PART IV: CERTIFICATION

Under penalties of perjury, I certify that: *REQUIRED

- The number shown on this form is my correct tax payer identification number (or I am waiting for a number to be issued to me), **AND**
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have **not** been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, **AND**
- I am a U.S. Citizen or other U.S. person.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding

Printed Name	Printed Title	Telephone Number
Signature	Email	Date (mm/dd/yyyy)

PART V: DIRECT DEPOSIT (ACH) This is the County's preferred payment method

Warning: The Board of County Commissioners Leon County will not process International ACH Transactions (IAT). If any payment to you from the County will ever result in an IAT under National Automated Clearing House Association (NACHA) operating rules or if you are not sure if the rules apply to you DO NOT FILL OUT THIS SECTION OF THE FORM. Please provide a copy of a voided check or letter from bank confirming information indicated above.

Include a voided check or letter from financial institution if requesting ACH payments

Type of Account Checking Savings

I acknowledge the IAT warning and authorize the Board of County Commissioners Leon County to initiate direct deposit of funds to the account and financial institution indicated, and to recover funds deposited in error if necessary in compliance with NACHA regulations.

Signature	Printed Name
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PART VI: OFFICE USE ONLY

OFFICIAL / POC USE ONLY BUSINESS UNIT DATE (mm/dd/yyyy) PHONE NO. POC (Print name) POC Initials	CLERK OF COURT FINANCE DEPARTMENT USE ONLY
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Instructions for Completing this Form

This form substitutes for the IRS W-9 form. Complete, sign, and upload this form through the Leon County Emergency Rental Assistance application if you will receive payment from the Board of County Commissioners Leon County for goods and services. The information collected on this form will allow the Board of County Commissioners Leon County to confirm your official business name, Tax Identification Number (TIN), and business address.

Please see below for step-by-step instructions on how to complete this form.

PART I: VENDOR INFORMATION

1. **Legal Business Name** - Enter the legal name as registered with the IRS or Social Security Administration. *If you are an individual*, enter your legal name here.
2. **DBA/Trade Name** - If your business operates under a trade name or DBA (doing business as), enter the DBA name here. If your local business name is different than your legal business name, enter your local business name here.
3. **Entity Type** - Check ONE box which describes your business entity.
4. **1099 Reporting Service Type** - If you are a landlord or property manager, checkmark "Rental of Real Property".

PART II: TAXPAYER IDENTIFICATION NUMBER (TIN) & TAXPAYER IDENTIFICATION TYPE

1. **Taxpayer Identification Number (TIN)** - Enter your TIN clearly. Each number should go in a separate box. Your TIN is always a 9-digit number and should either be a Social Security Number (SSN) or Federal Employer Identification Number (EIN) assigned to the business.
2. **TIN Type** - Checkmark whether your TIN is a Social Security Number (SSN) or a Federal Employer Identification Number (EIN).

PART III: ADDRESS

1. **Address** - Please indicate the legal business address. Must include Street Address, Unit/Office, State, City, and Zip Code
2. **Remittance Address** - Complete this section if your preferred mailing address is different than your legal business address

PART IV: CERTIFICATION

By signing this document you are certifying that all information provided is accurate and complete. The person signing this document should be the partner in the partnership, an officer of the corporation, the individual or sole proprietor noted under legal name above, or the government official for which the vendor account is established.

Identifying information is required of the person signing the form.

PART V: DIRECT DEPOSIT (ACH)

Direct Deposit Information - If you elect to receive payments from the Board of County Commissioners Leon County via Automated Clearing House (ACH) Direct Deposit, you must sign this section and provide a copy of the business's Routing Number and Account Number on bank letterhead.

If incorrect documentation is provided, the payment method will default to a mailed check to your business address.

I Acknowledge Print name and sign to acknowledge the IAT warning and to authorize the Board of County Commissioners Leon County to initiate direct deposit of funds to your financial institution provided.

Privacy Act Notice Section 6109 of the Internal Revenue Code requires you to furnish your correct TIN to persons who must file information returns with the Internal Revenue Service.