

day/week/month. The methodology utilized by the service provider to arrive at the amount and percentages charged to the County through this award must be clearly explained.

- A breakdown of **fringe benefits** components (including the overall fringe benefit percentage) for each direct service position must be included as part of the justification for each position.
- **Travel** is only allowable for direct service staff and the reasons for travel must be explained and justified. The number of miles and cost per mile must also be indicated. Effective August 1, 2009, the maximum charge per mile as per Miami-Dade County regulations is \$0.555 per mile, as adopted from the Federal IRS standard mileage rates. Therefore, providers may negotiate a travel rate up to but not exceeding \$0.555 per mile. The methodology utilized by the service provider to arrive at the amount and percentages charged to the County through this award must be clearly explained. Non-local travel costs must be approved by the Office of Grants Coordination (OGC) prior to travel.
- **Supplies** are allowable only for the direct provision of services under the proposed program. These costs must be described in detail and the amounts, percentages, and need for each cost must be justified. If necessary, these supplies may be listed as separate line items in the rows labeled "other direct costs." If separately listing the supply item, please clearly and briefly list the name or type of supply (e.g., Other Direct Costs: Paper). The methodology utilized by the service provider to arrive at the amount and percentages charged to the County through this award must be clearly explained.
- **Equipment** is allowable if it is utilized in the direct provision of services under the proposed program. The type of equipment must be listed and its use for the program must be described and justified. The methodology utilized by the service provider to arrive at the amount and percentages charged to the County through this award must be clearly explained. An inventory of equipment purchases that are >\$1,000 per individual item must be maintained by the service provider and reported annually to the OGC.
- Payments for **Contractual** services such as food providers, janitorial staff, etc., must be specified by providing a description of hourly rates or unit costs. This explanation must also indicate the reasons why County funds are being used to cover this expense. All contractual service line items require prior approval from the OGC.
- **Generic line items, such as "Miscellaneous," will not be accepted.** Each line item must be clearly identified and adequately justified. If a line item is composed of several related costs, each cost must be itemized separately as part of the justification for that item.
- **Other costs may be considered as direct if they are justified properly and approved by the OGC.** The item's relation to the direct provision of program services must be described as well as the methodology utilized by the service provider to arrive at the amount and percentages charged to the County through this award.

### **Indirect/Administrative Costs**

- Expenses included in the "**Indirect/Administrative Cost**" category must be individually listed in the budget justification. Please indicate the amount of indirect/overhead/administrative costs covered by the County through this award for each applicable line item (i.e., personnel, travel, supplies, equipment, etc.).
- Providers will be allowed to request any amount up to 15% of the Total Award for each program to cover administrative and/or indirect costs.
- Indirect/Administrative costs must be specified under the 'Indirect Costs' section of the Line Item Budget Form' utilizing the aforementioned object class categories.
- **IMPORTANT: A detailed breakdown of all indirect costs must be included on the budget form and in the narrative budget justification.**



## **APPENDIX D**

### **LABEL**

#### **FY 2011 Human and Social Services Initiative Community-Based Organization Funding Request for Proposals No. 0411**

**DELIVER PROPOSAL TO**

**Daniel T. Wall, Director**

**MIAMI-DADE COUNTY**

**OFFICE OF GRANTS COORDINATION (OGC)**

**C/O CLERK OF THE BOARD**

**111 NW 1<sup>st</sup> STREET, 17<sup>TH</sup> FLOOR, SUITE 17-202**

**MIAMI, FLORIDA 33128**

**AGENCY/ORGANIZATION NAME**



## **APPENDIX E**

# **FY 2011 HUMAN AND SOCIAL SERVICES CBO FUNDING RFP No. 0411**

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## **MIAMI-DADE COUNTY**

### **AFFIDAVITS and REQUIREMENTS**

**(Must be submitted with Proposal Original)**

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## Form A-1

**PROPOSER'S NAME** (Name of firm, entity or organization):**FEDERAL EMPLOYER IDENTIFICATION NUMBER:****NAME AND TITLE OF PROPOSER'S CONTACT PERSON:**

Name:

Title:

**MAILING ADDRESS:**

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**TELEPHONE:**

( ) \_\_\_\_\_

**FAX:**

( ) \_\_\_\_\_

**E-MAIL ADDRESS:****PROPOSER'S ORGANIZATIONAL STRUCTURE:**

\_\_\_\_ Corporation      \_\_\_\_ Partnership      \_\_\_\_ Proprietorship      \_\_\_\_ Joint Venture

\_\_\_\_ Other (Explain): \_\_\_\_\_

**IF CORPORATION,**

Date Incorporated/Organized: \_\_\_\_\_

State Incorporated/Organized: \_\_\_\_\_

States registered in as foreign corporation: \_\_\_\_\_

**PROPOSER'S SERVICE OR BUSINESS ACTIVITIES OTHER THAN WHAT THIS SOLICITATION REQUESTS FOR:****LIST NAMES OF PROPOSER'S SUBCONTRACTORS OR SUBCONSULTANTS FOR THIS PROJECT:****CRIMINAL CONVICTION DISCLOSURE:**

Pursuant to Miami-Dade County Ordinance No. 94-34, any individual who has been convicted of a felony during the past ten years and any corporation, partnership, joint venture or other legal entity having an officer, director, or executive who has been convicted of a felony during the past ten years shall disclose this information prior to entering into a contract with or receiving funding from the County.

☐ Place a checkmark here only if Proposer has such conviction to disclose to comply with this requirement.**PROPOSER'S AUTHORIZED SIGNATURE**

The undersigned hereby certified that this proposal is submitted in response to this solicitation.

Signed By: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

## Form A-2

# AFFIDAVIT OF MIAMI-DADE COUNTY LOBBYIST REGISTRATION FOR ORAL PRESENTATION

(1) Project Title: \_\_\_\_\_ Project No.: \_\_\_\_\_  
 (2) Department: \_\_\_\_\_  
 (3) Proposer's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Business Telephone: (\_\_\_\_) \_\_\_\_\_

## (4) List All Members of the Presentation Team Who Will Be Participating in the Oral Presentation:

NAME	TITLE	EMPLOYED BY	TEL. NO.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(ATTACH ADDITIONAL SHEET IF NECESSARY)

The individuals named above are Registered and the Registration Fee is not required for the Oral Presentation ONLY.

Any person who appears as a representative for an individual or firm for an oral presentation before a County certification, evaluation, selection, technical review or similar committee must be listed on an affidavit provided by the County. The affidavit shall be filed with the Clerk of the Board at the time the response is submitted. The individual or firm must submit a revised affidavit for additional team members added after submittal of the proposal with the Clerk of the Board at least two days prior to the oral presentation. Any person not listed on the affidavit or revised affidavit may not participate in the oral presentation.

Other than for the oral presentation, Proposers who wish to address the county commission, county board or county committee concerning any actions, decisions or recommendations of County personnel regarding this solicitation in accordance with Section 2-11.1(s) of the Code of Miami-Dade County MUST register with the Clerk of the Board and pay all applicable fees.

I do solemnly swear that all the foregoing facts are true and correct and I have read or am familiar with the provisions of Section 2-11.1(s) of the Code of Miami-Dade County as amended.

Signature of Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_  
 STATE OF \_\_\_\_\_  
 COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_,  
 by \_\_\_\_\_, a \_\_\_\_\_, who is personally known  
 (Individual, Officer, Partner or Agent) (Sole Proprietor, Corporation or Partnership)  
 to me or who has produced \_\_\_\_\_ as identification and who did/did not take an oath.

(Signature of person taking acknowledgement)

(Name of Acknowledger typed, printed or stamped)

(Title or Rank)

(Serial Number, if any)

**Form A-3**  
**ACKNOWLEDGEMENT OF ADDENDA**

**Instructions:** Complete Part I or Part II, whichever is applicable.

**PART I:** Listed below are the dates of issue for each Addendum received in connection with this solicitation.

Addendum #1, Dated \_\_\_\_\_, 200\_\_

Addendum #2, Dated \_\_\_\_\_, 200\_\_

Addendum #3, Dated \_\_\_\_\_, 200\_\_

Addendum #4, Dated \_\_\_\_\_, 200\_\_

Addendum #5, Dated \_\_\_\_\_, 200\_\_

Addendum #6, Dated \_\_\_\_\_, 200\_\_

Addendum #7, Dated \_\_\_\_\_, 200\_\_

Addendum #8, Dated \_\_\_\_\_, 200\_\_

Addendum #9, Dated \_\_\_\_\_, 200\_\_

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**PART II:**

\_\_\_\_ No Addendum was received in connection with this solicitation.

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Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Firm Name: \_\_\_\_\_

## Form A-4

**LOCAL BUSINESS PREFERENCE**

The evaluation of competitive solicitations is subject to Section 2-8.5 of the Miami-Dade County Code, which, except where contrary to federal or state law, or any other funding source requirements, provides that preference be given to local businesses. A local business, for the purposes of receiving the aforementioned preference above, shall be defined as a Proposer which meets all of the following.

1. Proposer has a valid Local Business Tax Receipt (formerly know as an Occupational License), issued by Miami-Dade County at least one year prior to proposal submission, that is appropriate for the goods, services or construction to be purchased.

**Proposer shall attach a copy of said Miami-Dade County Local Business Tax Receipt hereto. (Note: Current and past year receipts, or occupational licenses, as may be applicable, may need to be submitted as proof that it was issued at least one year prior to the proposal due date.)**

2. Proposer has a physical business address located within the limits of Miami-Dade County from which the Proposer operates or performs business. (Post Office Boxes are not verifiable and shall not be used for the purpose of establishing said physical address.)

**Proposer shall state its Miami-Dade County (or Broward County if applicable, see note below) physical business address \_\_\_\_\_**

3. Proposer contributes to the economic development and well-being of Miami-Dade County in a verifiable and measurable way. This may include but not be limited to the retention and expansion of employment opportunities and the support and increase in the County's tax base. To satisfy this requirement, the Proposer shall affirm in writing its compliance with any of the following objective criteria as of the proposal submission date:

Check box, if applicable:

- ☐ a) Proposer has at least ten (10) permanent full time employees, or part time employees equivalent to 10 FTE ("full-time equivalent" employees working 40 hours per week) that live in Miami-Dade County, or at least 25% of its employees that live in Miami-Dade County.
- ☐ b) Proposer contributes to the County's tax base by paying either real property taxes or tangible personal property taxes to Miami-Dade County.
- ☐ c) Proposer contributes to the economic development and well-being of Miami-Dade County by some other verifiable and measurable contribution by \_\_\_\_\_

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**Proposer shall check the box if applicable and, if checking item "c", shall provide a written statement, above, defining how Proposer meets that criteria.**



By signing below, Proposer affirms that it meets the above criteria to qualify for Local Preference and has submitted the requested documents.

Note: At this time, there is an interlocal agreement in effect between Miami-Dade and Broward Counties until September 30, 2009. Therefore, a Proposer which meets the requirements of (1), (2) and (3) above for Broward County shall be considered a local business for the purposes outlined herein.

Federal Employer Identification Number: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

I hereby certify that to the best of my knowledge and belief all the foregoing facts are true and correct.

Signature of Authorized Representative: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

SUBSCRIBED AND SWORN TO (or affirmed) before me on \_\_\_\_\_,  
(Date)

by \_\_\_\_\_ He/She is personally known to me or has  
(Affiant)  
presented \_\_\_\_\_ as identification.  
(Type of Identification)

\_\_\_\_\_  
(Signature of Notary) (Serial Number)

\_\_\_\_\_  
(Print or Stamp Name of Notary) (Expiration Date)

Notary Public \_\_\_\_\_  
(State)

Notary Seal

**FORM A-5**  
**SUBCONTRACTOR/SUPPLIER LISTING**  
**(Ordinance 97-104)**

Name of Proposer \_\_\_\_\_

This form, or a comparable listing meeting the requirements of Ordinance No. 97-104, **MUST** be completed by all bidders and proposers on County contracts for purchase of supplies, materials or services, including professional services which involve expenditures of \$100,000 or more, and all bidders and proposers on County or Public Health Trust construction contracts which involve expenditures of \$100,000 or more. **This form, or a comparable listing meeting the requirements of Ordinance No. 97-104, must be completed and submitted even though the bidder or proposer will not utilize subcontractors or suppliers on the contract. The bidder or proposer should enter the word "NONE" under the appropriate heading in those instances where no subcontractors or suppliers will be used on the contract.** A bidder or proposer who is awarded the contract shall not change or substitute first tier subcontractors or direct suppliers or the portions of the contract work to be performed or materials to be supplied from those identified except upon written approval of the County.

Business Name and Address of First Tier Subcontractor/Subconsultant	Principal Owner	Scope of Work to be Performed by Subcontractor/Subconsultant	(Principal Owner)	
			Gender	Race
Business Name and Address of Direct Supplier	Principal Owner	Supplies/Materials/Services to be Provided by Supplier	(Principal Owner)	
			Gender	Race

**I certify that the representations contained in this Subcontractor/Supplier Listing are to the best of my knowledge true and accurate.**

Signature of Proposer's  
Authorized Representative

Print Name

Print Title

Date

(Duplicate if additional space is needed)  
Form A-5(new 5/7/99)

**FAIR SUBCONTRACTING POLICIES**  
**(Ordinance 97-35)**

**FAIR SUBCONTRACTING PRACTICES**

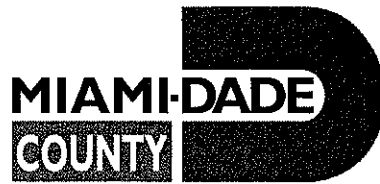
In compliance with Miami-Dade County Ordinance 97-35, the Proposer submits the following detailed statement of its policies and procedures for awarding subcontracts:

\_\_\_\_\_  
I hereby certify that the foregoing information is true, correct and complete.

Signature of Authorized Representative: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Firm Name: \_\_\_\_\_



## **APPENDIX F**

# **FY 2011 Human and Social Services Community- Based Organization Funding RFP No. 0411**

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**REQUIRED VENDOR REGISTRATION PACKAGE and VENDOR AFFIDAVITS FORMS**

**(Provided for information only, and should not to be submitted with Proposal)**

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Miami-Dade County

## VENDOR REGISTRATION PACKAGE

(Business Entity Registration Application)

### Department of Procurement Management Vendor Assistance Unit

111 NW 1<sup>st</sup> Street, Suite 1300, Miami, Florida 33128-1974

Telephone: 305-375-5773 Fax No: 305-375-5409

[www.miamidade.gov/dpm](http://www.miamidade.gov/dpm)

Please type or complete in ink and forward package by mail  
or in person to the address above.

Prospective vendors are required to complete a Vendor Registration Package prior to the award of any County contract. It is the vendor's responsibility to keep information current, complete and accurate, by submitting any modifications to the Department of Procurement Management, Vendor Assistance Unit.

### FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)

In order to establish a file for your firm, you must enter your firm's FEIN or if none, the owner's Social Security Number. This number becomes your "County Vendor Number".

Please enter your Federal Employee Identification Number (FEIN) or your Social Security Number (SSN).

☐ F.E.I.N. \_\_\_\_\_

☐ S.S.N. \_\_\_\_\_

The Vendor Registration Package is comprised of the following four sections.  
All sections must be completed and submitted.

Section 1: General Business Information	Pages	1-4
Section 2: Vendor Affidavits Form (Requires Notarized Signature)	Pages	5-8
Section 3: Vendor Commodity Codes Selection Checklist	Pages	9-14
Section 4: Vendor Document Checklist and Additional Government Forms	Page	15

### SECTION 1: GENERAL BUSINESS INFORMATION (pages 1-4)

#### 1. NAME OF BUSINESS:

Enter the name of the entity, individual(s), partners, or corporation; followed by any other name used to do business (DBA). This business name shall appear on all invoices submitted to the County.

\_\_\_\_\_  
Name of Entity, Individual(s), Partners or Corporation

\_\_\_\_\_  
Doing Business As (If same as above leave blank)

#### 2a. COMPANY BUSINESS ADDRESS:

Enter the physical address for the main office.

\_\_\_\_\_  
Street Address (P.O. Box Numbers are not permitted)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

#### 2b. MAILING ADDRESS:

Enter the business mailing address only if different from above. (Leave blank if address is the same as above).

\_\_\_\_\_  
Street Address (or P. O. Box Number)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

#### 2c. PAYMENT REMITTANCE ADDRESS:

Enter the company address where payment of invoices is to be mailed. (Enter even if same as above).

\_\_\_\_\_  
Street Address (or P.O. Box)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

**3. OTHER AFFILIATE:**

Enter name and address of Business Affiliate, i.e. parent company or subsidiary with the same Federal Employer Identification Number (FEIN) as firm submitting vendor application.

☐ Parent Company

☐ Subsidiary

\_\_\_\_\_  
Name of Firm

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

**4. CONTACT PERSON:**

Enter your firm's contact person's name and title.

☐ Mr. ☐ Ms. ☐ Mrs.

\_\_\_\_\_  
First Name

\_\_\_\_\_  
MI

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Title:

**5. FIRM'S TELEPHONE NUMBERS:**

Enter your firm's telephone number(s) and include Miami-Dade County, long distance or 800 numbers if available, and the fax number for the contact person named above. Enter your firm's e-mail address, if any. Solicitation notices will be e-mailed to this address. If no e-mail address is provided, solicitation notices will be forwarded via fax or to the business mailing address.

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Toll Free Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**6. TYPE OF BUSINESS ORGANIZATION:**

Place a checkmark next to the applicable item that describes the type of organization for your firm and enter additional information as requested for that item. If incorporated, a copy of the company Certificate of Incorporation and Form 8109 (Federal Tax Deposit Coupon) shall be submitted as verification of the company name and Federal Employer Identification Number (FEIN). If using a Social Security Number (SSN), a copy of the Social Security card shall be submitted. Also, if a corporation that trades in stock ownership in a public stock exchange market, check "Publicly Traded Corporation" and name the stock exchange market of registration and symbol.

☐ Corporation – Incorporated in the State of: \_\_\_\_\_

☐ Publicly Traded Corporation:

Stock Exchange Market of Registration: \_\_\_\_\_

Symbol: \_\_\_\_\_

☐ Partnership: \_\_\_\_\_

☐ Sole Proprietorship (One Individual Owner): \_\_\_\_\_

☐ Not-for-Profit Organization: \_\_\_\_\_

☐ Other (Specify): \_\_\_\_\_

**7. YEARS FIRM HAS BEEN IN BUSINESS:**

☐ Less than 1 year

☐ 1-5 years

☐ 6 to 10 years

☐ 10+ years

**8. PRINCIPALS AND OWNERSHIP:**

Please provide the full legal name and business address (Post office box addresses will not be accepted) of all individuals having any interest in a resulting contract. For a corporation, information shall be provided for each officer, director and stockholder holding, directly or indirectly, five (5) percent or more of outstanding stock (please indicate percent of ownership for each). For partnerships, the foregoing information shall be provided for each partner. For a trust, the foregoing information shall be provided for the trustee and each beneficiary of the trust. If publicly traded corporation or owned by other corporation, indicate so in space provided for below. (Duplicate page if needed for additional names).

[illegible]

9. **TYPE OF BUSINESS:** (Indicate by checkmark and identify type of commodity and/or service)

		Commodities/ Services
<input type="checkbox"/>	Manufacturer or Producer	
<input type="checkbox"/>	Dealer or Distributor	
<input type="checkbox"/>	Maintenance or Repair	
<input type="checkbox"/>	Rental or Lease	
<input type="checkbox"/>	Construction Contractor	
<input type="checkbox"/>	Professional Services	
<input type="checkbox"/>	Other	

10. TOTAL NUMBER OF EMPLOYEES:

11. **THE MIAMI-DADE COUNTY (MDC) CONFLICT OF INTEREST AND CODE OF ETHICS ORDINANCE 2-11.1** requires all Miami-Dade County employees and board members to seek a conflict of interest opinion prior to submittal of a bid, response or application of any type to contract with Miami-Dade County by the person or any member of his or her immediate family. Immediate family is defined as spouse, parents, sons and daughters. Pursuant to the ordinance, Miami-Dade County may not award a contract to any covered person who has not received an ethics opinion or a waiver from the Board of County Commissioners.

If you answer yes to questions 11a or 11b below, you are required to obtain a Conflict of Interest Opinion from the Miami-Dade County Commission on Ethics and Public Trust (COE) concerning the relationship of the County employee to the officers or principals of your firm. An opinion from the COE is required prior to the receipt or approval of the vendor application by the Miami-Dade County, Department of Procurement Management. Submit request for a written Conflict of Interest Opinion to: Miami-Dade County Commission on Ethics and Public Trust, 19 West Flagler Street, Suite #820, Miami, Florida, 33130 or fax to (305) 579-0273. Please contact the COE at (305) 579-2594 for further information. It is the responsibility of the vendor to forward the vendor application and the Conflict of Interest Opinion to the Miami-Dade County, Department of Procurement Management for processing.

**11a. ARE ANY OF THE OWNERS/PRINCIPALS IN THE FIRM, A MIAMI-DADE COUNTY EMPLOYEE(S), MIAMI-DADE COUNTY ELECTED OFFICIAL OR BOARD MEMBER?**

YES \_\_\_\_\_ NO \_\_\_\_\_

If "yes", complete the information below (use duplicate form for multiple relationships)

Miami-Dade County Employee Name: \_\_\_\_\_

Owner/ Principal Name: \_\_\_\_\_

Miami-Dade County Employee I.D. #: \_\_\_\_\_ Miami-Dade County Department where Employee works: \_\_\_\_\_

Position Held: \_\_\_\_\_ County Employee Hire Date: \_\_\_\_\_

**11b. ARE ANY IMMEDIATE FAMILY MEMBERS OF THE OWNERS/PRINCIPALS IN THE FIRM, A MIAMI-DADE COUNTY EMPLOYEE, MIAMI-DADE COUNTY ELECTED OFFICIAL OR BOARD MEMBER?**

(Immediate family is defined as spouse, parents, sons and daughters)

YES \_\_\_\_\_ NO \_\_\_\_\_

If "yes", complete the information below (use duplicate form for multiple relationships)

Miami-Dade County Employee Name: \_\_\_\_\_

Owner/ Principal Name: \_\_\_\_\_ Owner/Principal relationship to County Employee: \_\_\_\_\_

Miami-Dade County Employee I.D. #: \_\_\_\_\_ Miami-Dade County Department where Employee works: \_\_\_\_\_

Position Held: \_\_\_\_\_ County Employee Hire Date: \_\_\_\_\_

**AFFIRMATIONS AND SIGNATURES**

*The undersigned hereby certifies that the foregoing statements are true and correct and include all of the material necessary to identify and explain the operation of the business described herein as well as the ownership of it. The undersigned agrees to provide Miami-Dade County with current, complete and accurate information for each project contracted and for all proposed changes in any contractual agreement. Misrepresentations shall be grounds for terminating any contract.*

Signed this (date): \_\_\_\_\_ day of: \_\_\_\_\_ 20 \_\_\_\_\_

Sign by: \_\_\_\_\_ Name of Firm: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_





Miami-Dade County

## VENDOR AFFIDAVITS FORM

(Uniform County Affidavits)

### Department of Procurement Management Vendor Assistance Unit

111 NW 1<sup>st</sup> Street, Suite 1300, Miami, Florida 33128-1974

Telephone: 305-375-5773 Fax No: 305-375-5409

[www.miamidade.gov/dpm](http://www.miamidade.gov/dpm)

The completion of the Vendor Affidavits Form allows vendors to comply with affidavit requirements outlined in Section 2-8.1 of the Code of Miami-Dade County. Vendors are required to have a complete Vendor Registration Package on file, including required affidavits, prior to the award of any County contract.

It is the vendor's responsibility to keep all affidavit information up to date and accurate by submitting any modifications to the Department of Procurement Management, Vendor Assistance Unit.

### FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)

In order to establish a file for your firm, you must enter your firm's FEIN or if none, the owner's Social Security Number. This number becomes your "County Vendor Number".

Please enter your Federal Employee Identification Number (FEIN) or your Social Security Number (SSN).

☐ F.E.I.N. \_\_\_\_\_

☐ S.S.N. \_\_\_\_\_

## SECTION 2: VENDOR AFFIDAVITS FORM (pages 5-8)

Name of Entity, Individual (s), Partners, or Corporation

Doing Business As (If same as above, leave blank)

Street Address (Post Office addresses are not acceptable)

### 1. MIAMI-DADE COUNTY OWNERSHIP DISCLOSURE AFFIDAVIT

(Sec. 2-8.1 of the Miami-Dade County Code)

- a. Firms registered to do business with Miami-Dade County must fully disclose their legal name, physical address and ownership. Publicly traded Corporations are exempt from this requirement, but must indicate by letter that it is a Publicly Traded Corporation and include the name of the stock exchange market and symbol where registered.

If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who holds directly or indirectly five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full legal name and address shall be provided for each trustee and each beneficiary. (Post Office addresses are not acceptable). (Duplicate page if needed for additional names).

If no officer, director or stockholder owns (5%) or more of stock, please write "None" below.

FULL LEGAL NAME	TITLE	ADDRESS	% OF OWNERSHIP

- b. Provide the full legal names and business addresses of any other individuals (other than subcontractors, material men, suppliers, laborers, or lenders) that have, or will have, any interest (legal, equitable beneficial or otherwise) in the contract or business transaction with Miami Dade County (Post Office addresses are not acceptable). If "None", please indicate in space below:

FULL LEGAL NAME	TITLE	ADDRESS	% OF OWNERSHIP

2. **MIAMI-DADE COUNTY EMPLOYMENT DISCLOSURE AFFIDAVIT**

(County Ordinance No. 90-133, amending Section 2.8-1(d)(2) of the Miami-Dade County Code)

The following information is for compliance with all items in the aforementioned Section:

1. Does your firm have a collective bargaining agreement with its employees? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Does your firm provide paid health care benefits for its employees? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Provide a current breakdown (number of persons) of your firm's work force and ownership as to race, national origin and gender:

White	Black	Hispanic	Other
Males _____	Males _____	Males _____	Males _____
Females _____	Females _____	Females _____	Females _____

My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance. ☐

3. **MIAMI-DADE COUNTY EMPLOYMENT DRUG-FREE WORKPLACE CERTIFICATION**

(Section 2-8.1.2(b) of the Miami- Dade County Code)

All persons and entities that contract with Miami-Dade County are required to certify that they will maintain a drug-free workplace and such persons and entities are required to provide notice to employees and to impose sanctions for drug violations occurring in the workplace.

In compliance with Ordinance No. 92-15 of the Code of Miami-Dade County, the above named firm is providing a drug-free workplace. A written statement to each employee shall inform the employee about:

1. Danger of drug abuse in the workplace
2. The firms' policy of maintaining a drug-free environment at all workplaces
3. Availability of drug counseling, rehabilitation and employee assistance programs
4. Penalties that may be imposed upon employees for drug abuse violations

The firm shall also require an employee to sign a statement, as a condition of employment that the employee will abide by the terms of the drug-free workplace policy and notify the employer of any criminal drug conviction occurring no later than five (5) days after receiving notice of such conviction and impose appropriate personnel action against the employee up to and including termination. Firms may also comply with the County's Drug Free Workplace Certification where a person or entity is required to have a drug-free workplace policy by another local, state or federal agency, or maintains such a policy of its own accord and such policy meets the intent of this ordinance.

My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance. ☐

4. **MIAMI-DADE COUNTY DISABILITY AND NONDISCRIMINATION AFFIDAVIT**

(Article 1, Section 2-8.1.5 Resolution R182-00 Amending R-385-95 of the Miami-Dade County Code)

Firms transacting business with Miami-Dade County shall provide an affidavit indicating compliance with all requirements of the Americans with Disabilities Act (A.D.A.).

I, state that this firm, is in compliance with and agrees to continue to comply with, and assure that any subcontractor, or third party contractor shall comply with all applicable requirements of the laws including, but not limited to, those provisions pertaining to employment, provision of programs and services, transportation, communications, access to facilities, renovations, and new construction.

The American with Disabilities Act of 1990 (ADA), Pub. L. 101-336, 104 Stat 327, 42 U.S.C. Sections 225 and 611 including Titles I, II, III, IV and V.  
The Rehabilitation Act of 1973, 29 U.S.C. Section 794  
The Federal Transit Act, as amended, 49 U.S.C. Section 1612  
The Fair Housing Act as amended, 42 U.S.C. Section 3601-3631

I, hereby affirm that I am in compliance with the below sections:

Section 2-10.4(4)(a) of the Code of Miami-Dade County (Ordinance No. 82-37), which requires that all properly licensed architectural, engineering, landscape architectural, and land surveyors have an affirmative action plan on file with Miami-Dade County.

Section 2-8.1.5 of the Code of Miami-Dade County, which requires that firms that have annual gross revenues in excess of five (5) million dollars have an affirmative action plan and procurement policy on file with Miami-Dade County. Firms that have a Board of Directors that are representative of the population make-up of the nation may be exempt.

My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance ☐

5. **MIAMI-DADE COUNTY DEBARMENT DISCLOSURE AFFIDAVIT**  
(Section 10.38 of the Miami-Dade County Code)

Firms wishing to do business with Miami-Dade County must certify that its contractors, subcontractors, officers, principals, stockholders, or affiliates are not debarred by the County before submitting a bid.

I, confirm that none of this firms agents, officers, principals, stockholders, subcontractors or their affiliates are debarred by Miami-Dade County.

*My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance.* ☐

6. **MIAMI-DADE COUNTY VENDOR OBLIGATION TO COUNTY AFFIDAVIT**  
(Section 2-8.1 of the Miami-Dade County Code)

Firms wishing to transact business with Miami-Dade County must certify that all delinquent and currently due fees, taxes and parking tickets have been paid and no individual or entity in arrears in any payment under a contract, promissory note or other document with the County shall be allowed to receive any new business.

I, confirm that all delinquent and currently due fees or taxes including, but not limited to, real and personal property taxes, convention and tourist development taxes, utility taxes, and Local Business Tax Receipt collected in the normal course by the Miami-Dade County Tax Collector and County issued parking tickets for vehicles registered in the name of the above firm, have been paid.

I further affirm that this firm complies with Section 2-8.1, which requires that no individual or entity that is in arrears in any payment under a contract, promissory note or other document with the County shall be allowed to receive any new business.

*My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance.* ☐

7. **MIAMI-DADE COUNTY CODE OF BUSINESS ETHICS AFFIDAVIT**

(Article 1, Section 2-8.1(j) and 2-11(b)(1) of the Miami-Dade County Code through (6) and (9) of the County Code and County Ordinance No 00-1 amending Section 2-11.1(c) of the County Code)

Firms wishing to transact business with Miami-Dade County must certify that it has adopted a Code that complies with the requirements of Section 2-8.1 of the County Code. The Code of Business Ethics shall apply to all business that the contractor does with the County and shall, at a minimum, require the contractor to comply with all applicable governmental rules and regulations.

I confirm that this firm has adopted a Code of business ethics which complies with the requirements of Sections 2-8.1 of the County Code, and that such code of business ethics shall apply to all business that this firm does with the County and shall, at a minimum, require the contractor to comply with all applicable governmental rules and regulations.

*My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance* ☐

8. **MIAMI-DADE COUNTY FAMILY LEAVE AFFIDAVIT**

(Article V of Chapter 11, of the Miami-Dade County Code)

Firms contracting business with Miami-Dade County, which have more than fifty (50) employees for each working day during each of twenty (20) or more work weeks in the current or preceding calendar year, are required to certify that they provide family leave to their employees.

Firms with less than the number of employees indicated above are exempt from this requirement, but must indicate by letter (signed by an authorized agent) that it does not have the minimum number of employees required by the County Code.

I confirm that if applicable, this firm complies with Article V of Chapter II of the County Code, which requires that firms contracting business with Miami-Dade County which have more than fifty (50) employees for each working day during each of twenty (20) or more work weeks in the current or preceding calendar year are required to certify that they provide family leave to their employees.

*My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance.* ☐

9. **MIAMI-DADE COUNTY LIVING WAGE AFFIDAVIT**

(Section 2-8.9 of the Miami-Dade County Code)

All applicable contractors entering into a contract with the County shall agree to pay the prevailing living wage required by this section of the County Code.

I confirm that if applicable, this firm complies with Section 2-8.9 of the County Code, which requires that all applicable employers entering a contract with Miami-Dade County shall pay the prevailing living wage required by the section of the County Code.

*My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance.* ☐

10. **MIAMI-DADE COUNTY DOMESTIC LEAVE AND REPORTING AFFIDAVIT**

(Article 8, Section 11A-60 - 11A-67 of the Miami-Dade County Code)

Firms wishing to transact business with Miami-Dade County must certify that it is in compliance with the Domestic Leave Ordinance.

I confirm that if applicable, this firm complies with the Domestic Leave Ordinance. This ordinance applies to employers that have, in the regular course of business, fifty (50) or more employees working in Miami-Dade County for each working day during the current or preceding calendar year.

My initials acknowledge that I have read the aforementioned requirements and the entity is in compliance. ☐

**AFFIRMATION**

I, being duly sworn, do attest under penalty of perjury that the entity is in compliance with all requirements outlined in the Miami-Dade County Vendor Affidavits 1 – 10, pages 5 through 8 of this Vendor Registration Package.

I also attest that I will comply with and keep current all statements sworn to in the above affidavits and registration application. I will notify the Miami-Dade County, Vendor Assistance Unit, immediately if any of the statements attested hereto are no longer valid.

\_\_\_\_\_  
(Signature of Affiant)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Printed Name of Affiant and Title

**NOTARY PUBLIC INFORMATION**

Notary Public – State of: \_\_\_\_\_  
State

\_\_\_\_\_  
County of

SUBSCRIBED AND SWORN TO (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

by \_\_\_\_\_

He or she is personally known to me ☐

Or has produced identification ☐

Type of Identification Produced \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
(Serial Number)

\_\_\_\_\_  
Print or Stamp of Notary Public

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Notary Public Seal



Miami-Dade County

## VENDOR COMMODITY CODE SELECTION CHECKLIST

### Department of Procurement Management Vendor Assistance Unit

111 NW 1<sup>st</sup> Street, Suite 1300, Miami, Florida 33128-1974

Telephone: 305-375-5773 Fax No: 305-375-5409

[www.miamidade.gov/dpm](http://www.miamidade.gov/dpm)

Check the commodity codes below that identify those goods and services your company can supply. Once your Vendor Registration Package is processed, notification of solicitation opportunities for the commodities you select will be forwarded to your company. An update of your commodity selections can be made at any time by resubmitting a new Vendor Commodity Code Selection Checklist.

### FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)

In order to establish a file for your firm, you must enter your firm's FEIN or if none, the owner's Social Security Number. This number becomes your "County Vendor Number".

Please enter your Federal Employee Identification Number (FEIN) or your Social Security Number (SSN).

☐ F.E.I.N. \_\_\_\_\_

☐ S.S.N. \_\_\_\_\_

### SECTION 3: CHECK THE ITEMS THAT APPLY TO YOUR BUSINESS (pages 9-14)

COMPANY NAME: \_\_\_\_\_

#### 1. ADVERTISING SPECIALTIES/PROMOTIONAL ITEMS

- ☐ 080-00 Badges, Emblems, Nametags, Plates, etc.
- ☐ 350-00 Flags, Flag Poles, Banners and Accessories
- ☐ 578-84 Promotional and Advertising Items, Souvenirs
- ☐ 962-33 Engraving Services: Awards, Trophies, etc.
- ☐ 962-37 Flagpole Services
- ☐ 962-51 Laminating Services
- ☐ 962-52 Mapping Services

#### 2. AIR CONDITIONING, HEATING, VENTILATION, CHILLER PLANTS

- ☐ 031-00 Air Conditioning, Heating and Ventilating Equipment, Parts and Accessories
- ☐ 740-00 Refrigeration Equipment and Accessories
- ☐ 962-23 Chemical Treatment Services of Boilers and Tower Water Plants

#### 3. AIRCRAFT AND AIRPORT EQUIPMENT, ACCESSORIES, SUPPLIES AND SERVICES

- ☐ 035-00 Aircraft and Airport Equipment, Parts and Supplies
- ☐ 905-03 Aerial Patrolling Services (Not Survey)
- ☐ 905-05 Aerial Photography Services
- ☐ 905-10 Aerial Surveys (Including Wildlife Censuses)
- ☐ 905-12 Aircraft Crash Removal Services
- ☐ 905-14 Airplane/Helicopter Services (Not otherwise classified)
- ☐ 905-17 Airport Management Services
- ☐ 905-20 Air Rescue and Transfer of Patients
- ☐ 905-25 Aerial Crop Dusting and Seeding Services (All Kinds)
- ☐ 905-53 Pilot Training services
- ☐ 905-60 Removal Services of Rubber Deposits from Runways
- ☐ 905-70 Aircraft Storage Space Services (Not Building Lease)
- ☐ 906-06 Airport Services (Lighting, Fueling, Navigational Aids, etc.)

#### 4. ANIMALS, LIVE - AND - DRUGS, FOOD, CARE SERVICES AND SUPPLIES

- ☐ 040-00 Live Animals
- ☐ 325-00 Feed, Bedding, Vitamins and Supplements for Animals

- ☐ 080-75 Pet Identification Tags
- ☐ 080-80 Wildlife Bands, Labels and Tags
- ☐ 962-06 Animal Care, Animal Shelter Service, etc.

#### 5. APPAREL, UNIFORMS, GLOVES, SHOES, ETC.

- ☐ 200-00 Clothing, Apparel, Uniforms and Accessories
- ☐ 800-00 Shoes and Boots
- ☐ 962-78 Sewing and Alteration Services
- ☐ 962-80 Shoe and Boot Repair

#### 6. APPLIANCES

- ☐ 045-00 Appliances and Equipment, Household Type
- ☐ 500-00 Laundry and Dry Cleaning Equipment, Accessories, Parts and Supplies

#### 7. ART, CRAFT, PAINTINGS, MUSIC, ENTERTAINMENT

- ☐ 232-00 Crafts, General
- ☐ 233-00 Craft Supplies and Equipment
- ☐ 580-00 Musical Instruments, Accessories and Supplies
- ☐ 962-05 Amusement and Entertainment Services
- ☐ 962-63 Piano Tuning Services
- ☐ 962-72 Restoration/Preservation Services of Antiques, Costumes, Paintings and other Objects

#### 8. AUDIO VISUAL EQUIPMENT, TV/BROADCAST AND PRODUCTION SERVICE EQUIPMENT

- ☐ 803-00 Sound Systems, Components, Group Intercom, Public Address Systems
- ☐ 855-00 Theatrical Equipment and Supplies
- ☐ 840-00 Television Equipment and Accessories

#### 9. AUTOMOTIVE

- ☐ 025-00 Air Compressors and Accessories
- ☐ 055-00 Accessories for Vehicles
- ☐ 060-00 Automotive Maintenance Items
- ☐ 065-00 Automotive Bodies, Accessories and Supplies
- ☐ 070-00 Automotive Vehicles, Scooters, Trailers and related Transportation Equipment

- ☐ 075-00 Automotive Shop Equipment and Supplies
- ☐ 110-00 Belts and Belting
- ☐ 962-17 Bus and Taxi Services, Limousines and Vans
- ☐ 962-62 Pneumatic Tube, Maintenance and Repair
- ☐ 962-84 Tire Shredding Services
- ☐ 968-90 Vehicle Towing and Storage
- ☐ 962-85 Glass Tinting and Coating Services (Automotive and Buildings)

#### 10. BAGS, CONTAINERS, ACCESSORIES

- ☐ 085-00 Bags, Bagging, Ties
- ☐ 100-00 Barrels, Kegs and Containers
- ☐ 320-00 Equipment and Supplies for Fastening, Packaging, Strapping and tying
- ☐ 510-00 Laundry Bags, Supplies, Baskets, Trucks, Accessories

#### 11. BUILDING MATERIALS AND SUPPLIES

- ☐ 010-00 Acoustical Tile, Insulating Materials, etc.
- ☐ 135-00 Bricks and other Clay Products
- ☐ 150-00 Builder's Supplies
- ☐ 210-00 Concrete and Metal Curvets, Pilings, Septic Tanks, Accessories and Supplies
- ☐ 330-00 Fence Materials and Supplies
- ☐ 360-00 Floor Covering, Installation and Removal Equipment and Tools
- ☐ 440-00 Glass and Glazing Supplies
- ☐ 540-00 Lumber and Related Products
- ☐ 630-00 Paint, Wall Paper and Related Items
- ☐ 658-00 Pipe and Tubing
- ☐ 659-00 Pipe Fittings
- ☐ 670-00 Plumbing Equipment, Fixture and Supplies
- ☐ 745-00 Road and Highway Building Materials (Asphaltic)
- ☐ 750-00 Road and Highway Building Materials (Not Asphaltic)
- ☐ 770-00 Roofing Materials
- ☐ 360-00 Floor Covering Material and Supplies
- ☐ 670-00 Plumbing Equipment, Fixtures and Supplies

#### 12. BUILDINGS AND STRUCTURES – MODULAR – FABRICATED AND PREFABRICATED

- ☐ 155-00 Modular, Prefabricated and Fabricated Buildings, Bridges, Shelters and other Structures

#### 13. CHEMICALS, EPOXIES

- ☐ 180-00 Chemical Raw Material
- ☐ 190-00 Chemicals and Solvents
- ☐ 192-00 Cleaning Compositions, etc.
- ☐ 315-00 Epoxy Based Formulations for Adhesive, New Orleans, etc.
- ☐ 885-83 Flocculants, Polymeric
- ☐ 505-00 Laundry and Dry Cleaning Compounds and Supplies
- ☐ 885-00 Water and Wastewater Treatment Chemicals

#### 14. COMMUNICATIONS/TELECOMMUNICATIONS EQUIPMENT AND SUPPLIES

- ☐ 725-00 Radio Communication, Telephone and Telecommunication Equipment, Supplies and Accessories
- ☐ 730-00 Radio Communication and Telecommunication Testing, Measuring and Analyzing Equipment and Accessories

#### 15. CONSTRUCTION CONTRACTORS AND SUB-CONTRACTORS

- ☐ 906-00 Architect and other Professional Design Services
- ☐ 909-00 Building Construction Services
- ☐ 910-00 Building Maintenance and Repair Services
- ☐ 910-36 Air Conditioning Services
- ☐ 910-38 Asbestos Abatement
- ☐ 910-46 Lead Based Paint Abatement
- ☐ 910-60 Plumbing Services
- ☐ 918-00 Consulting Services
- ☐ 925-07 Air Conditioning Professional Services
- ☐ 962-16 Boring, Drilling, Testing and Sounding Services
- ☐ 962-18 Cable Construction Services, Installation/Maintenance (Fiber, Optics, Communication, Computer)
- ☐ 962-20 Septic Tank and Cesspool Cleaning and Maintenance Service
- ☐ 962-39 Hauling Services
- ☐ 962-64 Power Line Construction, Installation and Repair
- ☐ 962-96 Well Services (Including Oil, Gas & Water), Drilling, Plugging, Consulting, Maintenance, etc.
- ☐ 968-00 General Construction & Maintenance (Airport, Roadways, Utilities, Antenna Tower, Dredging Bridges, Demolition, Excavating, Wrecking and Removal, Sewer /Water/ Wastewater, Public Works Constructions, etc.)
- ☐ 968-20 Building Construction Contractor
- ☐ 968-43 Golf Course Construction, Repair and Maintenance
- ☐ 968-77 Surveying (Not Aerial or Research)
- ☐ 968-47 Inspection Services, Construction Type
- ☐ 988-00 Roadside, Grounds, Recreational and Park Area Services
- ☐ 988-03 Athletic Field Maintenance
- ☐ 988-14 Erosion Control Services
- ☐ 988-15 Fence Installation and Repair
- ☐ 988-20 Fire Break Services
- ☐ 988-26 Flood Control Services
- ☐ 988-32 Grading (Except for Road Building)
- ☐ 988-41 Irrigation System Construction
- ☐ 988-46 Landfill Services
- ☐ 988-52 Landscaping Design, Fertilizing, Planting, etc. (Not Grounds Maintenance or Tree Trimming)
- ☐ 988-63 Park Area Construction/Renovation
- ☐ 988-68 Paving and Repair of Parking Lots (Not Including Driveways and Roads)
- ☐ 988-83 Swimming Pool Construction, Repairs, Renovations
- ☐ 988-86 tennis and Sports court Repair and Renovation

#### 16. CONSTRUCTION CONTRACTOR-TYPE ASSISTANCE (TEMPORARY PERSONNEL AND WORKERS)

- ☐ 964-00 Temporary Personnel, Laborers and Workers (All Types)

#### 17. CONSTRUCTION EQUIPMENT – LIGHT AND HEAVY DUTY

- ☐ 360-00 Floor Covering Equipment
- ☐ 635-00 Painting Equipment and Accessories
- ☐ 755-00 Asphalt and Concrete Handling Equipment and Parts
- ☐ 760-00 Equipment and Parts: Earth Handling, Grading, Moving, Packing, etc.
- ☐ 765-00 Other Road and Highway Equipment and Parts

**18. CONSULTING SERVICES**

- ☐ Accounting, Auditing and Budget Consulting Services
- ☐ 918-06 Administrative Consulting Services
- ☐ 918-07 Advertising Consulting Services
- ☐ 918-09 Agricultural Consulting Services
- ☐ 918-12 Analytical Studies and Surveys, Consulting Services
- ☐ 918-14 Appraisal, Consulting Services
- ☐ 918-19 Buildings, Structures and Components, Consulting Services
- ☐ 918-26 Communications: Public Relations Consulting Services
- ☐ 918-28 Computer Consulting Services – Hardware
- ☐ 918-29 Computer Consulting Services – Software
- ☐ 918-31 Construction Consulting Services
- ☐ 918-38 Education and Training Consulting Services
- ☐ 918-41 Energy Conservation Consulting Services
- ☐ 918-42 Engineering Consulting Services
- ☐ 918-43 Environmental Consulting Services
- ☐ 918-46 Feasibility Studies Consulting Services
- ☐ 918-49 Finance/Economics Consulting Services
- ☐ 918-52 Food Consulting Services
- ☐ 918-54 Furnishing Consulting Services
- ☐ 918-58 Governmental Consulting Services
- ☐ 918-62 Horticultural Consulting Services
- ☐ 918-65 Human Relations Consulting Services
- ☐ 918-69 Insurance Consulting Services
- ☐ 918-70 Inventory Consulting Services
- ☐ 918-75 Management Consulting Services
- ☐ 918-76 Marketing Consulting Services
- ☐ 918-78 Medical Consulting Services
- ☐ 918-81 Natural Disaster Consulting Services
- ☐ 918-85 Personnel/Employment Consulting Services
- ☐ 918-87 Purchasing Consulting Services
- ☐ 918-89 Real Estate/Land Consulting Services
- ☐ 918-93 Security/Safety Consulting Services
- ☐ 918-95 Telecommunications Consulting Services
- ☐ 918-97 Utility Consulting Services: Gas, Water, Electric

**19. CREDIT, LOAN, FINANCIAL, LEASING, INSURANCE, TITLE, APPRAISALS, ABSTRACTS, REAL ESTATE**

- ☐ 946-00 Financial Services
- ☐ 953-00 Insurance, All types
- ☐ 962-09 Auctioneering Services
- ☐ 962-47 Insurance and Risk Management Services

**20. DATA PROCESSING EQUIPMENT, SOFTWARE AND SUPPLIES**

- ☐ 205-00 Computers and Information Processing Systems
- ☐ 250-00 Data Processing Cards and Paper
- ☐ 920-00 Data Processing Services and Software

**21. ELECTRICAL**

- ☐ 280-00 Electrical Cables and Wires
- ☐ 285-00 Electrical Equipment and Supplies

**22. ELECTRONIC EQUIPMENT: ANALYZERS, INDICATORS, ETC.**

- ☐ 220-00 Controlling, Indicating, Measuring, Monitoring and Recording Instruments and Supplies
- ☐ 287-00 Electronic Components, Replacement Parts, Accessories and

Miscellaneous Electronic Equipment

**23. ELEVATORS**

- ☐ 295-00 Elevators, Building Type

**24. ENVIRONMENTAL SERVICE, EQUIPMENT AND SUPPLIES**

- ☐ 962-40 Hazardous Materials Services
- ☐ 962-68 Radioactive Waste Disposal Services
- ☐ 988-56 Litter Removal Services, Including Beach Cleaning (Other than Buildings)

**25. FACILITIES SUPPLIES, SUPPORT SERVICES AND EQUIPMENT**

- ☐ 140-00 Broom, Brush and Mop Manufacturing Machinery and Supplies
- ☐ 145-00 Brushes
- ☐ 225-00 Cooler, Water Fountains (For Drinking Water)
- ☐ 192-00 Cleaning Compositions, Detergents, Solvents, Strippers
- ☐ 365-00 Floor Maintenance Machines, Parts and Accessories
- ☐ 485-00 Janitorial Supplies, General Line
- ☐ 910-00 Building Maintenance and Repair Services
- ☐ 910-39 Janitorial Services and Custodial Services
- ☐ 910-81 Window Washing Services
- ☐ 962-21 Cleaning Services, Steam and Pressure
- ☐ 962-85 Glass Tinting and Coating Services (Automobile and Buildings)
- ☐ 988-82 Swimming Pool Maintenance (Including Water Treatment)

**26. FOOD-BEVERAGES-TOBACCO PRODUCTS-ETC.**

- ☐ 375-00 Foods, Bakery Products (Fresh)
- ☐ 380-00 Foods, Dairy Products (Fresh)
- ☐ 385-00 Foods, Freeze-Dried, Frozen and Prepared Ready-to-Eat
- ☐ 390-00 Foods, Perishable
- ☐ 393-00 Foods, Stable Grocery and Grocer's Miscellaneous Items
- ☐ 660-00 Pipes, Tobaccos, Smoking Accessories, Alcoholic Beverages
- ☐ 962-19 Cafeteria Services
- ☐ 962-94 Bottled Water Services

**27. FUEL, OIL, GREASE AND LUBRICANTS**

- ☐ 405-00 Fuel, Oil, Grease and Lubricants
- ☐ 962-58 Oil Removal Services, Used (To include Oil and Petroleum Spill Services)
- ☐ 962-61 Petroleum Exploration Services

**28. FURNITURE, CURTAINS, UPHOLSTERY, INTERIOR DESIGN**

- ☐ 265-00 Draperies, Curtains, Upholstery
- ☐ 420-00 Furniture: Cafeteria, Chapel, Dormitory, Household, Library, Lounge, School
- ☐ 425-00 Furniture: Office
- ☐ 565-00 Mattress and Frame
- ☐ 962-48 Interior Design/Decorator Service
- ☐ 962-90 Upholstery Services (Other than Vehicles)

**29. HARDWARE, TOOLS, PAINTS AND ACCESSORIES**

- ☐ 005-00 Abrasives
- ☐ 445-00 Hand Tools (Powered and Non-Powered), Accessories and Supplies
- ☐ 450-00 Hardware and Related Items
- ☐ 460-00 Hose, Accessories and Supplies: Garden

**30. INDUSTRIAL EQUIPMENT AND ACCESSORIES**

- ☐ 105-00 Bearings (Except Wheel Bearings and Seals)
- ☐ 110-00 Belts and Belting: Conveyor, Elevator, Power Transmission, V-Belts
- ☐ 140-00 Manufacturing Machinery and Supplies: Broom, Brush, Mop
- ☐ 460-00 Hose, Accessories and Supplies: Industrial
- ☐ 565-00 Manufacturing Machinery and Supplies: Mattress and Frame
- ☐ 895-00 Welding Equipment and Supplies

**31. KITCHEN, BAKERY AND RESTAURANT EQUIPMENT, ACCESSORIES AND SUPPLIES**

- ☐ 090-00 Bakery Equipment, Commercial
- ☐ 160-00 Butcher Shop and Meat Processing Equipment
- ☐ 165-00 Cafeteria and Kitchen Equipment: Commercial
- ☐ 240-00 Cutlery, Dishes, Flatware, Glassware, Trays, Utensils, etc.
- ☐ 245-00 Dairy Equipment and Supplies
- ☐ 370-00 Food Processing and Canning Equipment and Supplies

**32. LABORATORY EQUIPMENT, SUPPLIES AND SERVICE**

- ☐ 175-00 Chemical Laboratory Equipment and Supplies
- ☐ 193-00 Clinical Laboratory Reagents and Tests: Blood Grouping, Diagnostic, Drug Monitoring, etc.
- ☐ 415-00 Laboratory Furniture
- ☐ 490-00 Laboratory Equipment and Accessories: Nuclear, Optical, And Physical
- ☐ 493-00 Laboratory Equipment and Accessories: Biochemistry, Chemistry, Environmental, Science, etc.
- ☐ 495-00 Laboratory and Field Equipment and Supplies: Biology, Botany, Geology, Microbiology, Zoology, etc.
- ☐ 962-22 Chemical Laboratory Services

**33. LANDSCAPING AND LAWN MAINTENANCE SERVICE, EQUIPMENT, TOOLS AND SUPPLIES**

- ☐ 020-00 Agricultural Equipment, Implements and Accessories
- ☐ 335-00 Fertilizers and Soil Conditioners
- ☐ 515-00 Lawn Maintenance Equipment, Accessories and Parts
- ☐ 595-00 Nursery Stock, Equipment and Supplies
- ☐ 790-00 Seed, Sod, Soil, Inoculants
- ☐ 968-88 Tree and Shrub Removal Services
- ☐ 988-36 Grounds Maintenance: Lawn Mowing, Edging, Plant, Trimming, etc.
- ☐ 988-88 Tree Trimming and Pruning Services
- ☐ 988-89 Weed and Vegetation Control Services

**34. LEATHER GOODS, LUGGAGE, PURSES, FABRIC, NOTIONS AND ACCESSORIES**

- ☐ 520-00 Leather and Related Equipment Products, Accessories and Supplies
- ☐ 530-00 Luggage, Brief cases, Purses and Related Items
- ☐ 590-00 Notions and Related Sewing Accessories and Supplies

**35. MARINE EQUIPMENT, SUPPLIES AND SERVICE**

- ☐ 120-00 Boats, Motors, Marine and Wildlife Equipment and Supplies
- ☐ 962-26 Diving Services
- ☐ 962-53 Marine Equipment and Marine Life Services (Except Maintenance and Repair)
- ☐ 962-54 Marine Buoys, Lights, etc., including servicing (Not Major Equipment)

**36. MASS TRANSIT (BUS, RAIL, PEOPLE'S MOVER)**

- ☐ 556-00 Transit Bus
- ☐ 557-00 Transit Bus Accessories and Supplies
- ☐ 558-00 Rail Vehicles and Systems
- ☐ 559-00 Rail Vehicle Parts and Accessories
- ☐ 864-00 Train Control, Electronics

**37. MEDICAL AND HOSPITAL EQUIPMENT, SUPPLIES AND SERVICE (INCLUDING PHARMACEUTICALS, DRUGS AND BIOCHEMICALS)**

- ☐ 260-00 Dental Equipment and Supplies
- ☐ 270-00 Drugs, Pharmaceuticals and Biological (For Human Therapeutic use)
- ☐ 271-00 Drugs, Pharmaceuticals and Sets (For high Volume Administration, Infusion, Irrigation, Tube Feeding)
- ☐ 410-00 Health Care and Hospital Facility Furniture
- ☐ 430-00 Gases, Containers and Equipment for Medical and Lab
- ☐ 435-00 Germicides, Cleaners and Related Sanitation Products for Health Care
- ☐ 465-00 Hospital and Surgical Equipment, Instruments and Supplies
- ☐ 470-00 Hospital Equipment and Supplies: Mobility, Speech Impaired, Restraint Items
- ☐ 475-00 Hospital, Surgical and Related Medical Accessories and Sundry Items
- ☐ 625-00 Optical Equipment, Accessories and Supplies
- ☐ 710-00 Prosthetic Devices, Hearing Aids, Auditory Testing Equipment, Electronic Reading Devices, etc.
- ☐ 948-00 Health Related Services
- ☐ 875-00 Veterinary Equipment, Accessories and Supplies
- ☐ 898-00 X-Ray and other Radiological Equipment and Supplies (Medical)

**38. METAL, METAL FABRICATION, FOUNDRY CASTING, MACHINE SHOP**

- ☐ 400-00 Equipment and Supplies, Foundry Castings
- ☐ 570-00 Metals: Bars, Plates, Rods, Sheets, Strips, Structural Shapes, Tubing and Fabricated Items
- ☐ 962-38 Galvanizing Services, Hot and Cold Dip, Plating Services
- ☐ 962-45 Industrial Electroplating Services
- ☐ 962-55 Metal Coating Services: Thermal, Spray and H.V.O.F. (High Velocity Oxy-Fuel)
- ☐ 962-82 Silver Recovery Services

**39. MICROFICHE AND MICROFILMING SERVICES AND EQUIPMENT**

- ☐ 575-00 Microfiche and Microfilm Equipment, Accessories and Supplies

**40. MISCELLANEOUS SERVICES**

- ☐ 962-31 Electrostatic Painting Services
- ☐ 962-36 Fireworks Display and Carnival Services
- ☐ 962-46 Installation Services (Not otherwise classified)
- ☐ 962-50 Leak Detection Services: Gas, Water, Chemical
- ☐ 962-59 Parking Services: Operation, Admission, Supervision
- ☐ 962-60 Party and Holiday Decorating Services
- ☐ 962-69 Records Management and Disposal
- ☐ 962-71 Religious Services
- ☐ 962-73 Restoration/Reclamation Services of Land and other Properties
- ☐ 968-46 Incinerator Services
- ☐ 578-35 Election Equipment and Supplies



**41. MISCELLANEOUS PROFESSIONAL SERVICES**

- ☐ 961-02 Administrative Services (All Kinds)
- ☐ 961-04 Artistic Services
- ☐ 961-12 Codification Services of Government Codes
- ☐ 961-15 Concession Services, Vending Services-Mobile and Stationary
- ☐ 961-17 Construction Management Services
- ☐ 961-19 Conservation and Resource Management Services
- ☐ 961-21 Cost Estimating Services
- ☐ 961-24 Court Reporting Services
- ☐ 961-27 Decontamination Services
- ☐ 961-29 Economic Impact Study Services
- ☐ 961-30 Employment Agency and Search Firm Services (Except for Temporary Personnel)
- ☐ 961-32 Environmental Impact Study Services
- ☐ 961-37 Fleet Management Services
- ☐ 961-39 Floral Designing and Arranging Services
- ☐ 961-41 Fuel Management
- ☐ 961-43 Hydrological Services
- ☐ 961-45 Inspections and Certification Services
- ☐ 961-48 Laboratory and Field Testing Services (Not otherwise classified)
- ☐ 961-50 Legal Services
- ☐ 961-51 Lobby Services
- ☐ 961-53 Marketing Services
- ☐ 961-55 Mining Services (Including Consulting and Geological Services)
- ☐ 961-57 Musical Production Services
- ☐ 961-60 Public Opinion Survey Services
- ☐ 961-64 Real Estate Services
- ☐ 961-66 Sign Painting Services
- ☐ 961-68 Sports Professional Services (Including Sports and Recreational Programs)
- ☐ 961-69 Testing and Monitoring Services (Air, Gas, Water)
- ☐ 961-70 Tank Management Services, Storage (Including Underground)
- ☐ 961-72 Transcription Services, Legal and Medical
- ☐ 961-74 Transit Management and Operations Services
- ☐ 961-75 Translation Services
- ☐ 961-78 Travel Agency, Chartering and Tour Guide Services
- ☐ 961-79 Travel Program Management Services
- ☐ 961-86 Veterinary Services
- ☐ 961-88 Weather Forecasting Services
- ☐ 961-90 Writing Services, All Kinds
- ☐ 961-94 Zoning, Land Use Study Services
- ☐ 999-99 Pre-Qualified Architects and Engineers

**42. MONEY MACHINES, FARE COLLECTION EQUIPMENT**

- ☐ 318-00 Fare Collection Equipment and Supplies, Money Machines

**43. MOTORS, PUMPS, COMPRESSORS**

- ☐ 025-00 Air compressors and Accessories
- ☐ 720-00 Pumping Equipment and Accessories
- ☐ 929-61 Motor Rewinding and Repairing, Electric
- ☐ 545-49 Motors and Engines, Industrial, All Types (Not Automotive, Lawn or Marine)
- ☐ 285-00 Motors and Parts (Fractional and Integral), Controllers, Relays, Switches, Starters, Coils, Brushes, etc.

**44. MOVING, STORAGE, TRANSPORTATION, DISPOSAL, REMOVAL AND DELIVERY SERVICE, EQUIPMENT AND SUPPLIES**

- ☐ 560-00 Material Handling and Storage Equipment and Accessories
- ☐ 962-24 Courier/Delivery Service
- ☐ 962-25 Removal and Disposal of Dead Animals
- ☐ 962-56 Moving Services
- ☐ 962-57 Moving Services, House, Portable Buildings, Trailers,
- ☐ 295-50 Moving Walks and Parts
- ☐ 962-86 Transportation of Goods (Freight)
- ☐ 962-95 Warehousing and Storage Services (Not Storage Space Rental)

**45. OFFICE/SCHOOL/LIBRARY SUPPLIES**

- ☐ 015-00 Paper and Supplies for Office Machines
- ☐ 310-00 Envelopes, Plain or Printed
- ☐ 610-00 Carbon Paper and Ribbons
- ☐ 615-00 Office Supplies, General
- ☐ 620-00 Erasers, Inks, Leads, Pens, Pencils, etc.
- ☐ 645-00 Paper (For Office and Printing Use)
- ☐ 715-00 Publications and Audio Visual Materials
- ☐ 785-00 School Equipment and Supplies
- ☐ 962-74 Re-inking Services for Ribbons
- ☐ 956-00 Library Services, Subscriptions

**46. OFFICE EQUIPMENT, SUPPLIES AND ACCESSORIES**

- ☐ 555-00 Marking and Stenciling Devices
- ☐ 600-00 Office Machines, Equipment and Accessories
- ☐ 605-00 Office Mechanical Aids, Small Machines and Apparatuses

**47. PARK AND PLAYGROUND EQUIPMENT, SPORTING GOODS, SUPPLIES, ACCESSORIES, ETC.**

- ☐ 195-00 Clocks, Timers
- ☐ 650-00 Park, Playground, Recreational Area and Swimming Pool Equipment
- ☐ 805-00 Sporting and Athletic Goods
- ☐ 962-08 Athletic Training Services

**48. PERSONAL ITEMS AND BEAUTY CARE AND SUPPLIES**

- ☐ 095-00 Barber and Beauty Shop Equipment and Supplies
- ☐ 195-00 Clocks, Timers, Watches and Jeweler's and Watchmaker's Tools and Equipment

**49. PEST CONTROL SERVICE, EQUIPMENT AND SUPPLIES**

- ☐ 675-00 Poisons: Agricultural and Industrial
- ☐ 910-59 Pest Control Service and Termite Inspection
- ☐ 988-72 Pest Control Services (Other than Buildings)

**50. PHOTOGRAPHIC EQUIPMENT, SUPPLIES AND SERVICE**

- ☐ 655-00 Photographic Equipment and Supplies

**51. PRINTING EQUIPMENT, MACHINE SUPPLIES AND ACCESSORIES**

- ☐ 700-00 Printing Plant Equipment, Accessories, Machine Supplies and Maintenance

**52. PRINTING SERVICES**

- ☐ 125-00 Bookbinding Supplies
- ☐ 255-00 Decals and Stamps
- ☐ 300-00 Embossing and Engraving
- ☐ 310-00 Envelopes
- ☐ 395-00 Continuous Forms: Snap-outs, Computer Forms

- ☐ 860-00 Tickets, coupon Books, Sales Books, Strip Books, etc.
- ☐ 908-00 Bookbinding, Re-binding and Repairing
- ☐ 962-14 Blueprinting Services
- ☐ 965-00 Printing Preparations, Etching, Photoengraving, Preparation of Mats, Negatives and Plates
- ☐ 966-00 Printing, Publishing, Silk Screening, Typesetting
- ☐ 915-76 Reproduction (Copy Machines)
- ☐ 956-20 Copying Services

**53. RECYCLED AND RECYCLABLE MATERIALS, PRODUCTS AND SERVICES**

- ☐ 100-67 Containers, Recycling
- ☐ 310-60 Envelopes, Recycled Paper
- ☐ 395-51 Continuous Forms, Recycled, All Types
- ☐ 405-87 Recycled Petroleum Products
- ☐ 410-68 Recycled Health care and Hospital Furniture
- ☐ 415-57 Recycled Laboratory Furniture (All Types)
- ☐ 420-81 Recycled Furniture for Cafeteria, Chapel, Dormitory, Household, Library, Lounge, School (All Types)
- ☐ 425-64 Recycled Office Furniture (All Types)
- ☐ 440-62 Recycled Glass-Products
- ☐ 450-64 Recycled Hardware and Rubber Products
- ☐ 465-81 Recycled Hospital and Surgical Equipment
- ☐ 470-58 Recycled Mobility, Speech Impaired and Restraint Items
- ☐ 475-72 Recycled Hospital Accessories and Sundry Equipment and Supplies
- ☐ 520-61 Recycled Leather Products
- ☐ 540-77 Recycled Lumber
- ☐ 578-64 Recycling Equipment, Machines and Supplies
- ☐ 610-33 Recycled Carbon Paper
- ☐ 610-34 Recycled Ribbons
- ☐ 615-73 Recycled Office Supplies
- ☐ 620-94 Recycled Pens and Pencils
- ☐ 640-66 Recycled Paper, Plastics and Styrofoam Products (Disposable Type)
- ☐ 645-00 Recycled Paper Stock
- ☐ 650-48 Recycled Recreational and Park Equipment
- ☐ 655-79 Recycled Photographic Equipment and Supplies
- ☐ 745-68 Recycled Asphalt
- ☐ 755-37 Asphalt Recycling Equipment
- ☐ 906-74 Recycling System Services
- ☐ 962-70 Recycling Services (Including Collection)

**54. RENTAL OR LEASE - ALL TYPES: EQUIPMENT, SPACE, LAND, LOT, ETC.**

- ☐ 971-00 Rental or Lease - Real Property, Hotel/Motel Accommodations, Exhibit Booth, etc.
- ☐ 975-00 Rental or Lease - Equipment, Tools, Appliances, Furniture, Vehicles, Instruments, Machinery, etc.

**55. REPAIRS, MAINTENANCE AND RECONDITIONING**

- ☐ 928-00 Automobiles Trucks, Trailers, Buses, etc.
- ☐ 929-00 Agricultural, Industrial, Marine and Heavy Equipment
- ☐ 931-00 Appliances, Athletic, cafeteria, Furniture, Musical Instruments
- ☐ 934-00 Laundry, Lawn, Painting, Plumbing and Spraying Equipment
- ☐ 936-00 General Equipment
- ☐ 938-00 Hospital, Laboratory and Testing Equipment
- ☐ 939-00 Office and Photographic Equipment, Radios and TV

**Sets**

- ☐ 940-00 Railroad and Track Equipment

**56. SALE OF SURPLUS AND OBSOLETE ITEMS**

- ☐ 998-00 Sale of Surplus and Obsolete Items

**57. SECURITY AND SAFETY EQUIPMENT, SUPPLIES AND SERVICE**

- ☐ 340-00 Fire Protection Equipment and Supplies
- ☐ 345-00 First Aid and Safety Equipment and Supplies
- ☐ 550-20 Flares and Fuses
- ☐ 680-00 Police Equipment and Supplies
- ☐ 962-65 Protection Services (Not Including Buildings)
- ☐ 990-05 Alarm Services
- ☐ 990-10 Armored Car Services
- ☐ 990-22 Card Access Security Services
- ☐ 990-25 Crime Prevention Services
- ☐ 990-27 Crossing Guard Services
- ☐ 990-30 Disaster Relief Services
- ☐ 990-32 Driver's License Services
- ☐ 990-37 Emergency Medical and Ambulance Services (Excluding Fire Services)
- ☐ 990-41 Fingerprinting Services
- ☐ 990-42 Fire and Safety Services
- ☐ 990-46 Guard and Security Services
- ☐ 990-52 Investigative Services
- ☐ 990-67 Patrol Services
- ☐ 990-70 Polygraph Testing Services
- ☐ 990-77 Safety Training and Awareness Services (Highway Safety, Boating, Seat Belt, etc.)
- ☐ 990-80 Surveillance Services

**58. SIGNS, SIGNAGE AND TRAFFIC CONTROL DEVICES**

- ☐ 550-00 Markers, Plaques, Signs and Traffic Control Devices
- ☐ 550-20 Flares and Fuses
- ☐ 968-80 Traffic Sign Installation
- ☐ 968-81 Traffic Sign Maintenance and Repair
- ☐ 968-82 Traffic Signal Installation
- ☐ 968-83 Traffic Signal Maintenance and Repair

**59. SOCIAL AND COMMUNITY SERVICES**

- ☐ 964-00 Temporary Personnel and Workers (All Types)

**60. WATERWORKS AND SEWAGE UTILITIES**

- ☐ 890-00 Water Supply and Sewage Treatment Equipment
- ☐ 962-91 Utility Locator Service (Underground)
- ☐ 962-92 Video Scanning Services of Sewers, Waterwells, etc.
- ☐ 968-00 Utilities, Water, Wastewater Services, Construction and Maintenance
- ☐ 968-65 Pipeline Construction and Repair
- ☐ 968-68 Sewer and Storm Drain Construction
- ☐ 968-69 Sewer Maintenance and Repair
- ☐ 968-73 Storm Drain Cleaning, Repair and Sludge Removal Services
- ☐ 968-93 Well Pointing Services (De-watering)
- ☐ 968-94 Waterproofing Systems and Repair Work
- ☐ 968-95 Wastewater Treatment Plant, Operations, Testing, Maintenance
- ☐ 968-96 Water System, Mains and Service Line Construction and Repair Service



Miami-Dade County

## VENDOR CHECKLIST OF DOCUMENTS TO BE SUBMITTED

### Department of Procurement Management Vendor Assistance Unit

111 NW 1<sup>st</sup> Street, Suite 1300, Miami, Florida 33128-1974

Telephone: 305-375-5773 Fax No: 305-375-5409

[www.miamidade.gov/dpm](http://www.miamidade.gov/dpm)

In order to establish a computer file for your firm, you must enter your firm's FEIN or if none, the owner's Social Security Number. This number becomes your "County Vendor Number".

Please enter your Federal Employee Identification Number (FEIN) Number or your Social Security Number (SSN).

☐ F.E.I.N.

☐ S.S.N.

### SECTION 4: CHECKLIST OF DOCUMENTS TO BE SUBMITTED (pages 15)

- ☐ Submit copy of current Local Business Tax Receipt (formerly the Miami-Dade County Occupational License) for businesses physically located in Miami-Dade County). Contact the Miami-Dade Tax Collector's Office at [www.miamidade.gov/taxcollector](http://www.miamidade.gov/taxcollector) or contact:

The Miami-Dade County Tax Collector's Main Office, Local Business Tax Section  
140 West Flagler, Room 101, Miami, Florida, 33130

Telephone: (305) 270-4949

Fax: (305) 372-6368

- or -

The Miami-Dade County Tax Collector's Office  
South Dade Government Center, 10710 SW 211 Street, Room 104  
Miami, Florida 33189

- ☐ Submit copy of Certificate if your company is under one of the following:

- Corporation
- Trademarks
- Limited Partnerships
- Limited Liability Company
- Limited Liability & General Partnerships
- Fictitious Business Name(s), if required

**Note:** Miami-Dade County will confirm the validity of Certificates with the applicable state authority. For companies located in Florida and registered with the Florida Department of State, Division of Corporations, the company's Federal Employer Identification Number (FEIN) must be posted on the Florida Division of Corporation's website. To confirm that your FEIN is posted, visit the State website at [www.sunbiz.org](http://www.sunbiz.org) Under "Document Search", press "Inquire by Name" or "Inquire by Federal Employer Identification Number (FEIN)" to produce the corresponding report.

If your company's Federal Employer Identification Number (FEIN) is not posted, contact the Florida Department of State, Division of Corporations and request that your company (FEIN) be added to your file posted on the web. Requests must be provided on your company's letterhead and reference the document number assigned when your company was registered. Submit your request via fax to (1-850-245-6013), or contact the agency at 1-850-245-6052 for additional information.

- ☐ W-9 (Request for Taxpayer ID Number and Certification) **AND/OR** W-8ECI Form (Certificate of Foreign Person's Claim for Exemption from Withholding on Income Effectively Connected With the Conduct of a Trade or Business in the United States) (Documents and Instructions Attached).

- ☐ Submit copy of Form 8109 (Federal Tax Deposit Coupon preprinted from the IRS with your Business name and FEIN number) **OR** any other preprint IRS form issued by the IRS identifying your business name and FEIN number.

- ☐ Submit copy of Social Security Card – If registering under your name, Fictitious Business Name(s) and FEIN number is not available.



*Miami-Dade County*  
DEPARTMENT OF PROCUREMENT MANAGEMENT

## **NOTICE OF REQUIREMENTS CONCERNING THE USE OF SOCIAL SECURITY NUMBERS**

Effective October 1, 2007, the Florida Legislature adopted new requirements under Section 119.071(5) of the Florida Statutes, relating to the collection and dissemination of Social Security Numbers by all "Agencies" in Florida. Under the new requirements, an agency may not collect an individual's Social Security Number unless the agency has stated in writing the purpose for its collection.

Please be aware that the Miami-Dade County Department of Procurement Management (County) collects Social Security Numbers from individuals, in lieu of a Federal Employer Identification Number (FEIN), if a FEIN has not been issued by the Internal Revenue Service for the individual/firm registering as a vendor with the County.

In order to establish a file for your firm, you must provide your firm's Federal Employer Identification Number (FEIN). If no FEIN exists, the Social Security Number of the owner or individual must be provided. This number becomes your "County Vendor Number". To comply with Section 119.071(5) of the Florida Statutes relating to the collection of an individual's Social Security Number, be aware that DPM requests the Social Security Number for the following purposes:

- Identification of individual account records
- To make payments to individual/vendor for goods and services provided to Miami-Dade County
- Tax reporting purposes
- To provide a unique identifier in the vendor database that may be used for searching and sorting departmental records

If you have any questions concerning the use of your Social Security Number, you may contact the Department of Procurement Management, Vendor Assistance Unit at (305) 375-5773.

## Request for Taxpayer Identification Number and Certification

Give form to the  
requester. Do not  
send to the IRS.

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership

☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ .....

☐ Other (see instructions) ▶

☐ Exempt  
payee

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

List account number(s) here (optional)

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer identification number

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. 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
3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

**Limited liability company (LLC).** Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

For an LLC classified as a partnership or a corporation, enter the LLC's name on the "Name" line and any business, trade, or DBA name on the "Business name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note.** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

### Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),

2. The United States or any of its agencies or instrumentalities,

3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,

4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or

5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

7. A foreign central bank of issue,

8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,

9. A futures commission merchant registered with the Commodity Futures Trading Commission,

10. A real estate investment trust,

11. An entity registered at all times during the tax year under the Investment Company Act of 1940,

12. A common trust fund operated by a bank under section 584(a),

13. A financial institution,

14. A middleman known in the investment community as a nominee or custodian, or

15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

<sup>1</sup>See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup>However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [www.irs.gov](http://www.irs.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

**Signature requirements.** Complete the certification as indicated in 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>3</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Disregarded entity not owned by an individual	The owner
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

### Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

### Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

### Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.consumer.gov/idtheft](http://www.consumer.gov/idtheft) or 1-877-IDTHEFT(438-4338).

Visit the IRS website at [www.irs.gov](http://www.irs.gov) to learn more about identity theft and how to reduce your risk.



# Instructions for the Requester of Form W-9

(Rev. September 2007)

## Request for Taxpayer Identification Number and Certification



Department of the Treasury  
Internal Revenue Service

Section references are to the Internal Revenue Code unless otherwise noted.

### What's New

Section 6049 contains new information reporting requirements for tax-exempt interest. For information on certification rules for tax-exempt interest payments, see Notice 2006-93 on page 798 of Internal Revenue Bulletin (I.R.B.) 2006-44 at [www.irs.gov/pub/irs-irbs/irb06-44.pdf](http://www.irs.gov/pub/irs-irbs/irb06-44.pdf).

### Reminders

- The backup withholding rate is 28% for reportable payments.
- The IRS website offers TIN Matching e-services for payers to validate name and TIN combinations. See *Taxpayer Identification Number (TIN) Matching* on page 4.

### How Do I Know When To Use Form W-9?

Use Form W-9 to request the taxpayer identification number (TIN) of a U.S. person (including a resident alien) and to request certain certifications and claims for exemption. (See *Purpose of Form* on Form W-9.) Withholding agents may require signed Forms W-9 from U.S. exempt recipients to overcome any presumptions of foreign status. For federal purposes, a U.S. person includes but is not limited to:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- Any estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

A partnership may require a signed Form W-9 from its U.S. partners to overcome any presumptions of foreign status and to avoid withholding on the partner's allocable share of the partnership's effectively connected income. For more information, see Regulations section 1.1446-1.

Advise foreign persons to use the appropriate Form W-8. See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*, for more information and a list of the W-8 forms.

Also, a nonresident alien individual may, under certain circumstances, claim treaty benefits on scholarships and fellowship grant income. See Pub. 515 or Pub. 519, *U.S. Tax Guide for Aliens*, for more information.

### Electronic Submission of Forms W-9

Requesters may establish a system for payees and payees' agents to submit Forms W-9 electronically, including by fax. A requester is anyone required to file an information return. A payee is anyone required to provide a taxpayer identification number (TIN) to the requester.

**Payee's agent.** A payee's agent can be an investment advisor (corporation, partnership, or individual) or an introducing broker. An investment advisor must be registered with the Securities Exchange Commission (SEC) under the Investment Advisers Act of 1940. The introducing broker is a broker-dealer that is regulated by the SEC and the National Association of Securities Dealers, Inc., and that is not a payer. Except for a broker who acts as a payee's agent for "readily tradable instruments," the advisor or broker must show in writing to the payer that the payee authorized the advisor or broker to transmit the Form W-9 to the payer.

**Electronic system.** Generally, the electronic system must:

- Ensure the information received is the information sent, and document all occasions of user access that result in the submission;
- Make reasonably certain that the person accessing the system and submitting the form is the person identified on Form W-9, the investment advisor, or the introducing broker;
- Provide the same information as the paper Form W-9;
- Be able to supply a hard copy of the electronic Form W-9 if the Internal Revenue Service requests it; and
- Require as the final entry in the submission an electronic signature by the payee whose name is on Form W-9 that authenticates and verifies the submission. The electronic signature must be under penalties of perjury and the perjury statement must contain the language of the paper Form W-9.



**TIP** For Forms W-9 that are not required to be signed, the electronic system need not provide for an electronic signature or a perjury statement.

For more details, see the following.

- Announcement 98-27 on page 30 of I.R.B. 1998-15 available at [www.irs.gov/pub/irs-irbs/irb98-15.pdf](http://www.irs.gov/pub/irs-irbs/irb98-15.pdf).
- Announcement 2001-91 on page 221 of I.R.B. 2001-36 available at [www.irs.gov/pub/irs-irbs/irb01-36.pdf](http://www.irs.gov/pub/irs-irbs/irb01-36.pdf).

### Individual Taxpayer Identification Number (ITIN)

Form W-9 (or an acceptable substitute) is used by persons required to file information returns with the IRS to get the payee's (or other person's) correct name and

TIN. For individuals, the TIN is generally a social security number (SSN).

However, in some cases, individuals who become U.S. resident aliens for tax purposes are not eligible to obtain an SSN. This includes certain resident aliens who must receive information returns but who cannot obtain an SSN.

These individuals must apply for an ITIN on Form W-7, Application for IRS Individual Taxpayer Identification Number, unless they have an application pending for an SSN. Individuals who have an ITIN must provide it on Form W-9.

## Substitute Form W-9

You may develop and use your own Form W-9 (a substitute Form W-9) if its content is substantially similar to the official IRS Form W-9 and it satisfies certain certification requirements.

You may incorporate a substitute Form W-9 into other business forms you customarily use, such as account signature cards. However, the certifications on the substitute Form W-9 must clearly state (as shown on the official Form W-9) that under penalties of perjury:

1. The payee's TIN is correct,
2. The payee is not subject to backup withholding due to failure to report interest and dividend income, and
3. The payee is a U.S. person.

You may not:

1. Use a substitute Form W-9 that requires the payee, by signing, to agree to provisions unrelated to the required certifications, or
2. Imply that a payee may be subject to backup withholding unless the payee agrees to provisions on the substitute form that are unrelated to the required certifications.

A substitute Form W-9 that contains a separate signature line just for the certifications satisfies the requirement that the certifications be clearly stated.

If a single signature line is used for the required certifications and other provisions, the certifications must be highlighted, boxed, printed in bold-face type, or presented in some other manner that causes the language to stand out from all other information contained on the substitute form. Additionally, the following statement must be presented to stand out in the same manner as described above and must appear immediately above the single signature line:

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

If you use a substitute form, you are required to provide the Form W-9 instructions to the payee only if he or she requests them. However, if the IRS has notified the payee that backup withholding applies, then you must instruct the payee to strike out the language in the certification that relates to underreporting. This instruction can be given orally or in writing. See item 2 of the *Certification* on Form W-9. You can replace "defined below" with "defined in the instructions" in item 3 of the *Certification* on Form W-9 when the instructions will not be provided to the payee except upon request. For more information, see Revenue Procedure 83-89, 1983-2, C.B. 613; amplified by Revenue Procedure 96-26 which is on

page 22 of I.R.B. 1996-8 at  
[www.irs.gov/pub/irs-irbs/irb96-08.pdf](http://www.irs.gov/pub/irs-irbs/irb96-08.pdf).

## TIN Applied for

For interest and dividend payments and certain payments with respect to readily tradable instruments, the payee may return a properly completed, signed Form W-9 to you with "Applied For" written in Part I. This is an "awaiting-TIN" certificate. The payee has 60 calendar days, from the date you receive this certificate, to provide a TIN. If you do not receive the payee's TIN at that time, you must begin backup withholding on payments.

**Reserve rule.** You must backup withhold on any reportable payments made during the 60-day period if a payee withdraws more than \$500 at one time, unless the payee reserves 28 percent of all reportable payments made to the account.

**Alternative rule.** You may also elect to backup withhold during this 60-day period, after a 7-day grace period, under one of the two alternative rules discussed below.

**Option 1.** Backup withhold on any reportable payments if the payee makes a withdrawal from the account after the close of 7 business days after you receive the awaiting-TIN certificate. Treat as reportable payments all cash withdrawals in an amount up to the reportable payments made from the day after you receive the awaiting-TIN certificate to the day of withdrawal.

**Option 2.** Backup withhold on any reportable payments made to the payee's account, regardless of whether the payee makes any withdrawals, beginning no later than 7 business days after you receive the awaiting-TIN certificate.



*The 60-day exemption from backup withholding does not apply to any payment other than interest, dividends, and certain payments relating to readily tradable instruments. Any other reportable payment, such as nonemployee compensation, is subject to backup withholding immediately, even if the payee has applied for and is awaiting a TIN.*

*Even if the payee gives you an awaiting-TIN certificate, you must backup withhold on reportable interest and dividend payments if the payee does not certify, under penalties of perjury, that the payee is not subject to backup withholding.*

*If you do not collect backup withholdings from affected payees as required, you may become liable for any uncollected amount.*

## Payees Exempt From Backup Withholding

Even if the payee does not provide a TIN in the manner required, you are not required to backup withhold on any payments you make if the payee is:

1. An organization exempt from tax under section 501(a), any IRA where the payor is also the trustee or custodian, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,

4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The following types of payments are exempt from backup withholding as indicated for items 1 through 15 above.

**Interest and dividend payments.** All listed payees are exempt except the payee in item 9.

**Broker transactions.** All payees listed in items 1 through 13 are exempt. A person registered under the Investment Advisers Act of 1940 who regularly acts as a broker is also exempt.

**Barter exchange transactions and patronage dividends.** Only payees listed in items 1 through 5 are exempt.

**Payments reportable under sections 6041 and 6041A.** Only payees listed in items 1 through 7 are generally exempt.

However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC, Miscellaneous Income, are not exempt from backup withholding.

- Medical and health care payments.
- Attorneys' fees.
- Payments for services paid by a federal executive agency. (See Revenue Ruling 2003-66 on page 1115 in I.R.B. 2003-26 at [www.irs.gov/pub/irs-irbs/irb03-26.pdf](http://www.irs.gov/pub/irs-irbs/irb03-26.pdf).)

## Payments Exempt From Backup Withholding

Payments that are not subject to information reporting also are not subject to backup withholding. For details, see sections 6041, 6041A, 6042, 6044, 6045, 6049, 6050A, and 6050N, and their regulations. The following payments are generally exempt from backup withholding.

### Dividends and patronage dividends

- Payments to nonresident aliens subject to withholding under section 1441.
- Payments to partnerships not engaged in a trade or business in the United States and that have at least one nonresident alien partner.

- Payments of patronage dividends not paid in money.
- Payments made by certain foreign organizations.
- Section 404(k) distributions made by an ESOP.

### Interest payments

- Payments of interest on obligations issued by individuals. However, if you pay \$600 or more of interest in the course of your trade or business to a payee, you must report the payment. Backup withholding applies to the reportable payment if the payee has not provided a TIN or has provided an incorrect TIN.
- Payments described in section 6049(b)(5) to nonresident aliens.
- Payments on tax-free covenant bonds under section 1451.
- Payments made by certain foreign organizations.
- Mortgage or student loan interest paid to you.

### Other types of payment

- Wages.
- Distributions from a pension, annuity, profit-sharing or stock bonus plan, any IRA where the payor is also the trustee or custodian, an owner-employee plan, or other deferred compensation plan.
- Distributions from a medical or health savings account and long-term care benefits.
- Certain surrenders of life insurance contracts.
- Distribution from qualified tuition programs or Coverdell ESAs.
- Gambling winnings if regular gambling winnings withholding is required under section 3402(q). However, if regular gambling winnings withholding is not required under section 3402(q), backup withholding applies if the payee fails to furnish a TIN.
- Real estate transactions reportable under section 6045(e).
- Cancelled debts reportable under section 6050P.
- Fish purchases for cash reportable under section 6050R.
- Certain payment card transactions by a qualified payment card agent (as described in Revenue Procedure 2004-42 and Regulations section 31.3406(g)-1(f) and if the requirements under Regulations section 31.3406(g)-1(f) are met. Revenue Procedure 2004-42 is on page 121 of I.R.B. 2004-31 which is available at [www.irs.gov/pub/irs-irbs/irb04-31.pdf](http://www.irs.gov/pub/irs-irbs/irb04-31.pdf).

## Joint Foreign Payees

If the first payee listed on an account gives you a Form W-8 or a similar statement signed under penalties of perjury, backup withholding applies unless:

1. Every joint payee provides the statement regarding foreign status, or
2. Any one of the joint payees who has not established foreign status gives you a TIN.

If any one of the joint payees who has not established foreign status gives you a TIN, use that number for purposes of backup withholding and information reporting.

For more information on foreign payees, see the Instructions for the Requester of Forms W-8BEN, W-8ECI, W-8EXP, and W-8IMY.

## Names and TINs To Use for Information Reporting

Show the full name and address as provided on Form W-9 on the information return filed with the IRS and on the copy furnished to the payee. If you made payments to more than one payee or the account is in more than one name, enter on the first name line only the name of the payee whose TIN is shown on the information return. You may show the names of any other individual payees in the area below the first name line.

**Sole proprietor.** Enter the individual's name on the first name line. On the second name line, enter the business name or "doing business as (DBA)" if provided. You may not enter only the business name. For the TIN, you may enter either the individual's SSN or the employer identification number (EIN) of the business. However, the IRS encourages you to use the SSN.

**LLC.** For an LLC that is disregarded as an entity separate from its owner, you must show the owner's name on the first name line. On the second name line, you may enter the LLC's name. Use the owner's TIN. Do not enter the disregarded entity's EIN.

## Notices From the IRS

The IRS will send you a notice if the payee's name and TIN on the information return you filed do not match the

IRS's records. (See *Taxpayer Identification Number (TIN) Matching* below.) You may have to send a "B" notice to the payee to solicit another TIN. Pub. 1281, Backup Withholding for Missing and Incorrect Name/TIN(s), contains copies of the two types of "B" notices.

## Taxpayer Identification Number (TIN) Matching

TIN Matching allows a payer or authorized agent who is required to file Forms 1099-B, DIV, INT, MISC, OID, and/or PATR to match TIN and name combinations with IRS records before submitting the forms to the IRS. TIN Matching is one of the e-services products that is offered, and is accessible through the IRS website. Go to [www.irs.gov](http://www.irs.gov) and search for "e-services." It is anticipated that payers who validate the TIN and name combinations before filing information returns will receive fewer backup withholding (CP2100) "B" notices and penalty notices.

## Additional Information

For more information on backup withholding, see Pub. 1281.

Form **W-8ECI**

(Rev. February 2006)

Department of the Treasury  
Internal Revenue Service**Certificate of Foreign Person's Claim That Income Is  
Effectively Connected With the Conduct of a Trade or  
Business in the United States**

- ▶ Section references are to the Internal Revenue Code. ▶ See separate instructions.  
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

**Note:** Persons submitting this form must file an annual U.S. income tax return to report income claimed to be effectively connected with a U.S. trade or business (see instructions).

**Do not use this form for:**

- A beneficial owner solely claiming foreign status or treaty benefits . . . . . **W-8BEN**
- A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) . . . . . **W-8EXP**

**Note:** These entities should use Form W-8ECI if they received effectively connected income (e.g., income from commercial activities).

- A foreign partnership or a foreign trust (unless claiming an exemption from U.S. withholding on income effectively connected with the conduct of a trade or business in the United States) . . . . . **W-8BEN or W-8IMY**
- A person acting as an intermediary . . . . . **W-8IMY**

**Note:** See instructions for additional exceptions.

**Instead, use Form:****Part I Identification of Beneficial Owner** (See instructions.)

- 1** Name of individual or organization that is the beneficial owner **2** Country of incorporation or organization

- 3** Type of entity (check the appropriate box): ☐ Individual ☐ Corporation ☐ Disregarded entity  
☐ Partnership ☐ Simple trust ☐ Complex trust ☐ Estate  
☐ Government ☐ Grantor trust ☐ Central bank of issue ☐ Tax-exempt organization  
☐ Private foundation ☐ International organization

- 4** Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box.**

City or town, state or province. Include postal code where appropriate.

Country (do not abbreviate)

- 5** Business address in the United States (street, apt. or suite no., or rural route). **Do not use a P.O. box.**

City or town, state, and ZIP code

- 6** U.S. taxpayer identification number (required—see instructions)

☐ SSN or ITIN ☐ EIN

- 7** Foreign tax identifying number, if any (optional)

- 8** Reference number(s) (see instructions)

- 9** Specify each item of income that is, or is expected to be, received from the payer that is effectively connected with the conduct of a trade or business in the United States (attach statement if necessary) . . . . .

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**Part II Certification****Sign  
Here**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the beneficial owner (or I am authorized to sign for the beneficial owner) of all the income to which this form relates,
- The amounts for which this certification is provided are effectively connected with the conduct of a trade or business in the United States and are includible in my gross income (or the beneficial owner's gross income) for the taxable year, and
- The beneficial owner is not a U.S. person.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner.

Signature of beneficial owner (or individual authorized to sign for the beneficial owner) Date (MM-DD-YYYY) Capacity in which acting

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 25045D

Form **W-8ECI** (Rev. 2-2006)

# Instructions for Form W-8ECI



Department of the Treasury  
Internal Revenue Service

(Rev. February 2006)

## Certificate of Foreign Person's Claim That Income Is Effectively Connected With the Conduct of a Trade or Business in the United States

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Note.** For definitions of terms used throughout these instructions, see *Definitions* beginning on page 2.

**Purpose of form.** Foreign persons are generally subject to U.S. tax at a 30% rate on income they receive from U.S. sources. However, no withholding under section 1441 or 1442 is required on income that is, or is deemed to be, effectively connected with the conduct of a trade or business in the United States and is includible in the beneficial owner's gross income for the tax year.

The no withholding rule does not apply to personal services income and income subject to withholding under section 1445 (dispositions of U.S. real property interests) or section 1446 (foreign partner's share of effectively connected income).

If you receive effectively connected income from sources in the United States, you must provide Form W-8ECI to:

- Establish that you are not a U.S. person,
- Claim that you are the beneficial owner of the income for which Form W-8ECI is being provided, and
- Claim that the income is effectively connected with the conduct of a trade or business in the United States.

If you expect to receive both income that is effectively connected and income that is not effectively connected from a withholding agent, you must provide Form W-8ECI for the effectively connected income and Form W-8BEN (or Form W-8EXP or Form W-8IMY) for income that is not effectively connected.

If you submit this form to a partnership, the income claimed to be effectively connected with the conduct of a U.S. trade or business is subject to withholding under section 1446. If a nominee holds an interest in a partnership on your behalf, you, not the nominee, must submit the form to the partnership or nominee that is the withholding agent.

If you are a foreign partnership, a foreign simple trust, or a foreign grantor trust with effectively connected income, you may submit Form W-8ECI without attaching Forms W-8BEN or other documentation for your foreign partners, beneficiaries, or owners.

A withholding agent or payer of the income may rely on a properly completed Form W-8ECI to treat the payment associated with the Form W-8ECI as a payment to a foreign person who beneficially owns the amounts paid and is either entitled to an exemption from withholding under sections 1441 or 1442 because the income is effectively connected with the conduct of a trade or business in the United States or subject to withholding under section 1446.

Provide Form W-8ECI to the withholding agent or payer before income is paid, credited, or allocated to you. Failure by a beneficial owner to provide a Form W-8ECI when requested may lead to withholding at the 30% rate or the backup withholding rate.

**Additional information.** For additional information and instructions for the withholding agent, see the Instructions for the Requester of Forms W-8BEN, W-8ECI, W-8EXP, and W-8IMY.

**Who must file.** You must give Form W-8ECI to the withholding agent or payer if you are a foreign person and you are the beneficial owner of U.S. source income that is (or is deemed to be) effectively connected with the conduct of a trade or business within the United States.

Do not use Form W-8ECI if:

- You are a nonresident alien individual who claims exemption from withholding on compensation for independent or certain dependent personal services performed in the United States. Instead, provide Form 8233, Exemption from Withholding on Compensation for Independent (and Certain Dependent) Personal Services of a Nonresident Alien Individual, or Form W-4, Employee's Withholding Allowance Certificate.
- You are claiming an exemption from withholding under section 1441 or 1442 for a reason other than a claim that the income is effectively connected with the conduct of a trade or business in the United States. For example, if you are a foreign person and the beneficial owner of U.S. source income that is not effectively connected with a U.S. trade or business and are claiming a reduced rate of withholding as a resident of a foreign country with which the United States has an income tax treaty in effect, do not use this form. Instead, provide Form W-8BEN, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding.
- You are a foreign person receiving proceeds from the disposition of a U.S. real property interest. Instead, see Form 8288-B, Application for Withholding Certificate for Dispositions by Foreign Persons of U.S. Real Property Interests.
- You are filing for a foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming the applicability of section 115(2), 501(c), 892, 895, or 1443(b). Instead, provide Form W-8EXP, Certificate of Foreign Government or Other Foreign Organization for United States Tax Withholding. However, these entities should use Form W-8BEN if they are claiming treaty benefits or are providing the form only to claim exempt recipient status for backup withholding purposes. They should use Form W-8ECI if they received effectively connected income (for example, income from commercial activities).

- You are acting as an intermediary (that is, acting not for your own account or for that of your partners, but for the account of others as an agent, nominee, or custodian). Instead, provide Form W-8IMY, Certificate of Foreign Intermediary, Foreign Flow-Through Entity, or Certain U.S. Branches for United States Tax Withholding.
- You are a withholding foreign partnership or a withholding foreign trust for purposes of sections 1441 and 1442. A withholding foreign partnership is, generally, a foreign partnership that has entered into a withholding agreement with the IRS under which it agrees to assume primary withholding responsibility for each partner's distributive share of income subject to withholding that is paid to the partnership. A withholding foreign trust is, generally, a foreign simple trust or a foreign grantor trust that has entered into a withholding agreement with the IRS under which it agrees to assume primary withholding responsibility for each beneficiary's or owner's distributive share of income subject to withholding that is paid to the trust. Instead, provide Form W-8IMY.
- You are a foreign corporation that is a personal holding company receiving compensation described in section 543(a)(7). Such compensation is not exempt from withholding as effectively connected income, but may be exempt from withholding on another basis.
- You are a foreign partner in a partnership and the income allocated to you from the partnership is effectively connected with the conduct of the partnership's trade or business in the United States. Instead, provide Form W-8BEN. However, if you made or will make an election under section 871(d) or 882(d), provide Form W-8ECI. In addition, if you are otherwise engaged in a trade or business in the United States and you want your allocable share of income from the partnership to be subject to withholding under section 1446, provide Form W-8ECI.

**Giving Form W-8ECI to the withholding agent.** Do not send Form W-8ECI to the IRS. Instead, give it to the person who is requesting it from you. Generally, this will be the person from whom you receive the payment, who credits your account, or a partnership that allocates income to you. Give Form W-8ECI to the person requesting it before the payment is made, credited, or allocated. If you do not provide this form, the withholding agent may have to withhold at the 30% rate or the backup withholding rate. A separate Form W-8ECI must be given to each withholding agent.

**U.S. branch of foreign bank or insurance company.** A payment to a U.S. branch of a foreign bank or a foreign insurance company that is subject to U.S. regulation by the Federal Reserve Board or state insurance authorities is presumed to be effectively connected with the conduct of a trade or business in the United States unless the branch provides a withholding agent with a Form W-8BEN or Form W-8IMY for the income.

**Change in circumstances.** If a change in circumstances makes any information on the Form W-8ECI you have submitted incorrect, you must notify the withholding agent or payer within 30 days of the change in circumstances and you must file a new Form W-8ECI or other appropriate form. For example, if during the tax year any part or all of the income is no longer effectively connected with the conduct of a trade or business in the United States, your Form W-8ECI is no longer valid. You must notify the withholding agent and provide Form W-8BEN, W-8EXP, or W-8IMY.

**Expiration of Form W-8ECI.** Generally, a Form W-8ECI will remain in effect for a period starting on the date the form is signed and ending on the last day of the third succeeding calendar year, unless a change in circumstances makes any information on the form incorrect. For example, a Form W-8ECI signed on September 30, 2005, remains valid through December 31, 2008. Upon the expiration of the 3-year period, you must provide a new Form W-8ECI.

## Definitions

**Beneficial owner.** For payments other than those for which a reduced rate of withholding is claimed under an income tax treaty, the beneficial owner of income is generally the person who is required under U.S. tax principles to include the income in gross income on a tax return. A person is not a beneficial owner of income, however, to the extent that person is receiving the income as a nominee, agent, or custodian, or to the extent the person is a conduit whose participation in a transaction is disregarded. In the case of amounts paid that do not constitute income, beneficial ownership is determined as if the payment were income.

Foreign partnerships, foreign simple trusts, and foreign grantor trusts are not the beneficial owners of income paid to the partnership or trust. The beneficial owners of income paid to a foreign partnership are generally the partners in the partnership, provided that the partner is not itself a partnership, foreign simple or grantor trust, nominee or other agent. The beneficial owners of income paid to a foreign simple trust (that is, a foreign trust that is described in section 651(a)) are generally the beneficiaries of the trust, if the beneficiary is not a foreign partnership, foreign simple or grantor trust, nominee or other agent. The beneficial owners of a foreign grantor trust (that is, a foreign trust to the extent that all or a portion of the income of the trust is treated as owned by the grantor or another person under sections 671 through 679) are the persons treated as the owners of the trust. The beneficial owners of income paid to a foreign complex trust (that is, a foreign trust that is not a foreign simple trust or foreign grantor trust) is the trust itself.

Generally, these beneficial owner rules apply for purposes of sections 1441, 1442, and 1446, except that section 1446 requires a foreign simple trust to provide a Form W-8 on its own behalf rather than on behalf of the beneficiary of such trust.

The beneficial owner of income paid to a foreign estate is the estate itself.

A payment to a U.S. partnership, U.S. trust, or U.S. estate is treated as a payment to a U.S. payee. A U.S. partnership, trust, or estate should provide the withholding agent with a Form W-9. However, for purposes of section 1446, a U.S. grantor trust shall not provide the withholding agent a Form W-9. Instead, the grantor or other owner must provide Form W-8 or Form W-9 as appropriate.

**Disregarded entity.** A business entity that has a single owner and is not a corporation under Regulations section 301.7701-2(b) is disregarded as an entity separate from its owner.

A disregarded entity shall not submit this form to a partnership for purposes of section 1446. Instead, the owner of such entity shall provide appropriate documentation. See Regulations section 1.1446-1.

**Effectively connected income.** Generally, when a foreign person engages in a trade or business in the United States, all income from sources in the United States other than fixed or determinable annual or periodical (FDAP) income (for example, interest, dividends, rents, and certain similar amounts) is considered income effectively connected with a U.S. trade or business. FDAP income may or may not be effectively connected with a U.S. trade or business. Factors to be considered to determine whether FDAP income and similar amounts from U.S. sources are effectively connected with a U.S. trade or business include whether:

- The income is from assets used in, or held for use in, the conduct of that trade or business, or
- The activities of that trade or business were a material factor in the realization of the income.

There are special rules for determining whether income from securities is effectively connected with the active conduct of a U.S. banking, financing, or similar business. See section 864(c)(4)(B)(ii) and Regulations section 1.864-4(c)(5)(ii) for more information.

Effectively connected income, after allowable deductions, is taxed at graduated rates applicable to U.S. citizens and resident aliens, rather than at the 30% rate. You must report this income on your annual U.S. income tax or information return.

A partnership that has effectively connected income allocable to foreign partners is generally required to withhold tax under section 1446. The withholding tax rate on a partner's share of effectively connected income is 35%. In certain circumstances the partnership may withhold tax at the highest applicable rate to a particular type of income (for example long-term capital gain allocated to a noncorporate partner). Any amount withheld under section 1446 on your behalf, and reflected on Form 8805 issued by the partnership to you may be credited on your U.S. income tax return.

**Foreign person.** A foreign person includes a nonresident alien individual, a foreign corporation, a foreign partnership, a foreign trust, a foreign estate, and any other person that is not a U.S. person.

**Nonresident alien individual.** Any individual who is not a citizen or resident alien of the United States is a nonresident alien individual. An alien individual meeting either the "green card test" or the "substantial presence test" for the calendar year is a resident alien. Any person not meeting either test is a nonresident alien individual. Additionally, an alien individual who is a resident of a foreign country under the residence article of an income tax treaty, or an alien individual who is a bona fide resident of Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or American Samoa is a nonresident alien individual.



**CAUTION** *Even though a nonresident alien individual married to a U.S. citizen or resident alien may choose to be treated as a resident alien for certain purposes (for example, filing a joint income tax return), such individual is still treated as a nonresident alien for withholding tax purposes on all income except wages.*

See Pub. 519, U.S. Tax Guide for Aliens, for more information on resident and nonresident alien status.

**Withholding agent.** Any person, U.S. or foreign, that has control, receipt, or custody of an amount subject to

withholding or who can disburse or make payments of an amount subject to withholding is a withholding agent. The withholding agent may be an individual, corporation, partnership, trust, association, or any other entity including (but not limited to) any foreign intermediary, foreign partnership, and U.S. branches of certain foreign banks and insurance companies. Generally, the person who pays (or causes to be paid) an amount subject to withholding to the foreign person (or to its agent) must withhold.

## Specific Instructions

### Part I

**Line 1.** Enter your name. If you are filing for a disregarded entity with a single owner who is a foreign person, this form should be completed and signed by the foreign single owner. If the account to which a payment is made or credited is in the name of the disregarded entity, the foreign single owner should inform the withholding agent of this fact. This may be done by including the name and account number of the disregarded entity on line 8 (reference number) of Part I of the form.



**TIP** *If you own the income or account jointly with one or more other persons, the income or account will be treated by the withholding agent as owned by a foreign person if Forms W-8ECI are provided by all of the owners. If the withholding agent receives a Form W-9, Request for Taxpayer Identification Number and Certification, from any of the joint owners, the payment must be treated as made to a U.S. person.*

**Line 2.** If you are filing for a corporation, enter the country of incorporation. If you are filing for another type of entity, enter the country under whose laws the entity is created, organized, or governed. If you are an individual, write "N/A" (for "not applicable").

**Line 3.** Check the box that applies. By checking a box, you are representing that you qualify for this classification. You must check the one box that represents your classification (for example, corporation, partnership, etc.) under U.S. tax principles. If you are filing for a disregarded entity, you must check the "Disregarded entity" box (not the box that describes the status of your single owner).

**Line 4.** Your permanent residence address is the address in the country where you claim to be a resident for that country's income tax. Do not show the address of a financial institution, a post office box, or an address used solely for mailing purposes. If you are an individual who does not have a tax residence in any country, your permanent residence is where you normally reside. If you are not an individual and you do not have a tax residence in any country, the permanent residence address is where you maintain your principal office.

**Line 5.** Enter your business address in the United States. Do not show a post office box.

**Line 6.** You must provide a U.S. taxpayer identification number (TIN) for this form to be valid. A U.S. TIN is a social security number (SSN), employer identification number (EIN), or IRS individual taxpayer identification number (ITIN). Check the appropriate box for the type of U.S. TIN you are providing.



If you are an individual, you are generally required to enter your SSN. To apply for an SSN, get Form SS-5 from a Social Security Administration (SSA) office. Fill in Form SS-5 and return it to the SSA.

If you do not have an SSN and are not eligible to get one, you must get an ITIN. To apply for an ITIN, file Form W-7 with the IRS. It usually takes 4-6 weeks to get an ITIN.

If you are not an individual (for example, a foreign estate or trust), or you are an individual who is an employer or who is engaged in a U.S. trade or business as a sole proprietor, use Form SS-4, Application for Employer Identification Number, to obtain an EIN. If you are a disregarded entity, enter the U.S. TIN of your foreign single owner.

**Line 7.** If your country of residence for tax purposes has issued you a tax identifying number, enter it here. For example, if you are a resident of Canada, enter your Social Insurance Number.

**Line 8.** This line may be used by the filer of Form W-8ECI or by the withholding agent to whom it is provided to include any referencing information that is useful to the withholding agent in carrying out its obligations. A beneficial owner may use line 8 to include the name and number of the account for which he or she is providing the form. A foreign single owner of a disregarded entity may use line 8 to inform the withholding agent that the account to which a payment is made or credited is in the name of the disregarded entity (see instructions for line 1 on page 3).

**Line 9.** You must specify the items of income that are effectively connected with the conduct of a trade or business in the United States. You will generally have to provide Form W-8BEN, Form W-8EXP, or Form W-8IMY for those items from U.S. sources that are not effectively connected with the conduct of a trade or business in the United States. See Form W-8BEN, W-8EXP, or W-8IMY, and its instructions, for more details.

If you are providing this form to a partnership because you are a partner and have made an election under section 871(d) or section 882(d), attach a copy of the election to the form. If you have not made the election, but intend to do so effective for the current tax year, attach a statement to the form indicating your intent. See Regulations section 1.871-10(d)(3).

## Part II

**Signature.** Form W-8ECI must be signed and dated by the beneficial owner of the income, or, if the beneficial

owner is not an individual, by an authorized representative or officer of the beneficial owner. If Form W-8ECI is completed by an agent acting under a duly authorized power of attorney, the form must be accompanied by the power of attorney in proper form or a copy thereof specifically authorizing the agent to represent the principal in making, executing, and presenting the form. Form 2848, Power of Attorney and Declaration of Representative, may be used for this purpose. The agent, as well as the beneficial owner, may incur liability for the penalties provided for an erroneous, false, or fraudulent form.

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**Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. If you want to receive exemption from withholding on income effectively connected with the conduct of a trade or business in the United States, you are required to provide the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is: **Recordkeeping**, 3 hr., 35 min.; **Learning about the law or the form**, 3 hr., 22 min.; **Preparing the form**, 3 hr., 35 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can email us at [taxforms@irs.gov](mailto:taxforms@irs.gov). Please put "Forms Comment" on the subject line. Or you can write to Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6406, Washington, DC 20224. Do not send Form W-8ECI to this office. Instead, give it to your withholding agent.

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## **APPENDIX G**

### **FY 2011 HUMAN AND SOCIAL SERVICES CBO FUNDING RFP No. 0411**

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#### **BOARD OF DIRECTORS LIST**

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**APPENDIX G**  
**FY 2011 HUMAN AND SOCIAL SERVICES COMMUNITY-BASED ORGANIZATION**  
**FUNDING RFP No. 0411**

**Board of Directors List**

Name of the Agency: \_\_\_\_\_

Board Member Name and Address	Office Held (if any)	Race/Ethnicity and Gender	Length of Service on Board	Phone Number



## **APPENDIX H**

# **FY 2011 HUMAN AND SOCIAL SERVICES CBO FUNDING RFP No. 0411**

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### **MIAMI-DADE COUNTY COLLUSION AFFIDAVIT**

**(Provided for information only, and should not to be submitted with Proposal)**

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BID NO.:  
BID TITLE:

### COLLUSION AFFIDAVIT

(Code of Miami-Dade County Section 2-8.1.1 and 10-33.1) (Ordinance No. 08-113)

BEFORE ME, A NOTARY PUBLIC, personally appeared \_\_\_\_\_  
who being duly sworn states: (insert name of affiant)

I am over 18 years of age, have personal knowledge of the facts stated in this affidavit and I am an owner, officer, director, principal shareholder and/or I am otherwise authorized to bind the bidder of this contract.

I state that the bidder of this contract:

☐ is not related to any of the other parties bidding in the competitive solicitation, and that the contractor's proposal is genuine and not sham or collusive or made in the interest or on behalf of any person not therein named, and that the contractor has not, directly or indirectly, induced or solicited any other proposer to put in a sham proposal, or any other person, firm, or corporation to refrain from proposing, and that the proposer has not in any manner sought by collusion to secure to the proposer an advantage over any other proposer.

**OR**

☐ is related to the following parties who bid in the solicitation which are identified and listed below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note: Any person or entity that fails to submit this executed affidavit shall be ineligible for contract award. In the event a recommended contractor identifies related parties in the competitive solicitation its bid shall be presumed to be collusive and the recommended contractor shall be ineligible for award unless that presumption is rebutted by presentation of evidence as to the extent of ownership, control and management of such related parties in the preparation and submittal of such bids or proposals. Related parties shall mean bidders or proposers or the principals, corporate officers, and managers thereof which have a direct or indirect ownership interest in another bidder or proposer for the same agreement or in which a parent company or the principals thereof of one (1) bidder or proposer have a direct or indirect ownership interest in another bidder or proposer for the same agreement. Bids or proposals found to be collusive shall be rejected.

By: \_\_\_\_\_ 20\_\_\_\_  
Signature of Affiant Date

\_\_\_\_\_  
Printed Name of Affiant and Title Federal Employer Identification Number

\_\_\_\_\_  
Printed Name of Firm

\_\_\_\_\_  
Address of Firm

BID NO.:  
BID TITLE:

20 \_\_\_\_\_ SUBSCRIBED AND SWORN TO (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_.

He/She is personally known to me or has presented \_\_\_\_\_  
as identification. Type of identification

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Serial Number

\_\_\_\_\_  
Print or Stamp Name of Notary

\_\_\_\_\_  
Expiration Date

Notary Public – State of \_\_\_\_\_

Notary Seal