# **INVITATION TO BID**

# 2017 AERIAL SITE PREPARATION PROJECT NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT (BID NUMBER 17B-017)

The Northwest Florida Water Management District, 81 Water Management Drive, Havana, Florida 32333-4712, will receive sealed bids up to the 2:00 P.M. EDT opening time on August 2, 2017 for the aerial application of chemical herbicide on five clear-cut timber stands for vegetation management purposes to conduct site preparation activities on approximately 653 acres in Bay and Washington counties. The qualified contractor providing the lowest bid for the services will be issued a Purchase Order (P.O.) and Scope of Work (SOW) for the work, a draft of which is contained within the Invitation to Bid. The specifications and conditions contained in the draft SOW should be reviewed and taken into consideration when preparing bids.

All bids must conform to the instructions in the Invitation to Bid (ITB). Interested parties may obtain a copy of the complete ITB package at the above address, by calling (850) 539-5999, by visiting the District's website at <a href="http://www.myflorida.com/apps/vbs/vbs\_www.main\_menu">www.myflorida.com/apps/vbs/vbs\_www.main\_menu</a>.

The bid opening is open to the public. Provisions will be made to accommodate the handicapped (if requested) provided the District is given at least 72 hours advance notice.

All bids must comply with applicable Florida Statutes.

# TABLE OF CONTENTS

| Part I  | GENERAL INFORMATION                              | PAGE         |
|---------|--|--------------|
| 1-1     | Definitions                                      | 3            |
| 1-2     | Purpose  | 3            |
| 1-3     | Issuing Office, Date and Location of Bid Opening | 3<br>3<br>3  |
| 1-4     | Invitation to Bid                                | 3            |
| 1-5     | Contract Awards                                  | 3            |
| 1-6     | Development Costs                                | 4            |
| 1-7     | Inquiries  | 4            |
| 1-8     | Timetable  | 4            |
| 1-9     | Delays   | 5            |
| 1-10    | Bid Submission and Withdrawal                    | 5            |
| 1-11    | Bid Bond   | 6            |
| 1-12    | Addenda  | 6            |
| 1-13    | Equal Opportunity                                | 7            |
| 1-14    | Oral Presentations                               | 7            |
| 1-15    | News Releases                                    | 7            |
| 1-16    | Insurance  | 7            |
| 1-17    | Public Entity Crime                              | 7            |
| 1-18    | Discriminatory Vendor List                       | 8            |
| 1-19    | Prohibited Contact                               | 8            |
| 1-20    | Agency Inspectors General                        | 8            |
| 1-21    | Vendor Checklist                                 | 8            |
| Part II | SCOPE OF SERVICES                                | 9            |
| Part II | I INSTRUCTIONS FOR PREPARING BIDS                | 10           |
| 3-1     | Rules for Bids                                   | 10           |
| Part IV | V EVALUATION OF BIDS                             | 11           |
| 4-1     | Evaluation Method and Criteria                   | 11           |
| Part V  | BID FORMS  | 12           |
| 5-1     | Bidder Acknowledgment                            | 12           |
| 5-2     | Bid Format                                       | 13           |
| 5-3     | Bid Sheet  | 14           |
| Part V  | I DRAFT SCOPE OF WORK                            | See attached |

# **PART I**

# **GENERAL INFORMATION**

# 1-1 **DEFINITIONS**

For the purpose of this Invitation to Bid, "bidder" shall mean contractors, vendors, consultants, respondents, organizations, firms or other persons submitting a response to this Invitation to Bid.

# 1-2 PURPOSE

This Invitation to Bid provides guidelines for the submission of bids for the project entitled:

# 2017 AERIAL SITE PREPARATION PROJECT

# 1-3 ISSUING OFFICE, DATE AND LOCATION OF BID OPENING

Division of Asset Management Northwest Florida Water Management District 81 Water Management Drive Havana, Florida 32333-4712

Hereinafter referred to as the "District"

# THE DISTRICT MUST RECEIVE ALL BIDS BY 2:00 P.M. EDT ON AUGUST 2, 2017

# 1-4 INVITATION TO BID

The District solicits offers for the services of responsible bidders for the aerial application of chemical herbicide on five clear-cut timber stands for vegetation management purposes to perform the **2017 AERIAL SITE PREPARATION PROJECT.** 

# 1-5 CONTRACT AWARDS

The District anticipates issuing a purchase order to the bidder who submits the bid judged by the District to be most advantageous. The District anticipates awarding one contract or issuing a single purchase order, but reserves the right to award more than one if it is in its best interest.

The bidder understands that this Invitation to Bid does not constitute an agreement or a contract with the District. An official contractor agreement is not binding until bids are reviewed and accepted by appointed staff, approved by the appropriate level of authority within the District and both parties execute the contract or agreement.

The District reserves the right to reject any and all bids, to negotiate with the apparent low bidder, to waive any informalities of a minor nature, and to solicit and re-advertise for other bids. The District may correct mistakes clearly evident on the face of the bid documents, such as computation errors.

All bids are subject to the approval of the Northwest Florida Water Management District Governing Board at a duly noticed Board meeting, as appropriate.

Notice of an award shall be posted on the District's website at <a href="www.nwfwater.com">www.nwfwater.com</a> and the state Vendor Bid System through the BUSINESS link at MyFlorida.com. Failure to file a protest within the time prescribed in section 120.57 (3), Florida Statutes, shall constitute a waiver of the proceedings under Chapter 120, Florida Statutes.

# 1-6 DEVELOPMENT COSTS

Neither the District nor its representatives shall be liable for any expenses incurred in connection with the preparation of a response to this Invitation to Bid. Bidders should prepare their bids simply and economically, providing a straightforward and concise description of the bidders' ability to meet the requirements of the Invitation to Bid.

# 1-7 INQUIRIES

The District encourages interested parties to contact the District to discuss this Invitation to Bid. Tyler Macmillan, Chief, Bureau of Land Management Operations, will receive questions concerning this bid at (850) 539-5999, from 8:30 A.M. to 5:00 P.M. weekdays, from the date of this release to 5:00 P.M. EDT on July 21, 2017. The District will provide written answers to substantive questions on the District's website at: <a href="www.nwfwater.com">www.nwfwater.com</a> as well as post written answers to substantive questions on the state Vendor Bid System at:

# http://www.myflorida.com/apps/vbs/vbs www.main menu

The District will provide written answers to substantive questions received at least seven calendar days before the bid opening date.

# 1-8 TIMETABLE

The District and bidders shall adhere to the following schedule in all actions concerning this Invitation to Bid.

A. On July 10, 2017, the District issues the Invitation to Bid.

- B. From July 10, 2017, to 5:00 P.M. EDT on July 21, 2017, the District will receive and answer inquiries (received by email or mail). Any questions a bidder may have must be asked during this question and answer period. Answers to substantive questions will be posted on the District's website at <a href="www.nwfwater.com">www.nwfwater.com</a> and on the state Vendor Bid System at <a href="http://www.myflorida.com/apps/vbs/vbs/www.main\_menu">http://www.myflorida.com/apps/vbs/vbs/www.main\_menu</a>. Any substantive questions received regarding this solicitation after 5:00 P.M. EDT on July 21, 2017 will not be answered.
- C. The District must receive the bids by the 2:00 P.M. EDT opening time on August 2, 2017.
- D. From opening time the District will review and evaluate the bids on a timely basis.
- E. The District may enter into a contract or issue a purchase order after conducting negotiations and obtaining appropriate approvals.

# 1-9 DELAYS

The District may delay scheduled due dates if it is to the advantage of the District to do so. The District will notify bidders of all changes in scheduled dates by written notice which will be posted on the District's website at: <a href="http://www.myflorida.com/apps/vbs/vbs\_www.main\_menu">www.myflorida.com/apps/vbs/vbs\_www.main\_menu</a>.

# 1-10 BID SUBMISSION AND WITHDRAWAL

The District will receive bids at the following address:

Northwest Florida Water Management District Attn.: Agency Clerk 81 Water Management Drive Hayana, Florida 32333-4712

The face of the envelope shall state in capital letters: "SEALED BID ON BID NUMBER 17B-017 TO BE OPENED AUGUST 2, 2017, AT 2:00 P.M. EDT AT THE HEADQUARTERS OF THE NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT."

The envelope shall also include the bidder's return address. Envelopes received but not properly marked will not be considered.

Bidders shall submit one copy of the bid in a sealed, opaque envelope marked as noted above. The bidder may submit the bid in person, by courier, or by mail.

# THE DISTRICT MUST RECEIVE ALL BIDS BY 2:00 P.M. EDT ON AUGUST 2, 2017

Bids received after the established deadline will not be considered. The District cautions bidders to assure actual delivery of mailed or hand delivered bids directly to the District's Division of Administration prior to the deadline set for opening bids. Bidders are also cautioned that the District usually does not receive U.S. mail delivery until after 2:00 P.M. EDT each day. Any bids received after 2:00 P.M. EDT on August 2, 2017, regardless of postmark date, will not be considered. Telephone confirmation of timely receipt of the bid may be made by calling (850) 539-5999 before bid opening time.

Receipt of a bid by any District office or personnel other than the District receptionist or the Division of Administration does not constitute "delivery" as required by this Invitation to Bid.

Bidders may withdraw their bid by notifying the District in writing at any time prior to the opening. Bidders may withdraw their bids in person or through an authorized representative. Bidders and authorized representatives must disclose their identity and provide a signed receipt for the bid. Bids, once opened, become the property of the District and will not be returned to the bidders.

Upon opening, bids become "public record" and shall be subject to public disclosure consistent with Chapter 119, Florida Statutes. Bidders must invoke the exemptions to disclosure provided by law in the response to the Invitation to Bid by providing the specific statutory authority for the claimed exemption, identifying the data or other materials to be protected, and stating the reasons why such exclusion from public disclosure is necessary.

Bids will be made available for inspection at the time the District posts notice of its decision or intended decision concerning contract awards, or ten (10) days after the bid opening, whichever is earlier.

# 1-11 BID BOND

A bid bond will not be required for this project.

# 1-12 ADDENDA

If revisions become necessary, the District will post any addenda on the District's website and on the state Vendor Bid System website. All addenda issued by the District will include a receipt form, which must be signed and included with any bids that are submitted to the District. In the event that multiple addenda are issued, a separate receipt for each addendum must be included with the proposal at the time it is submitted to the District. Prospective bidders are responsible for determining whether addenda have been issued and are advised to check the District's website, the state Vendor Bid System or check with the District's project manager at least seven days before the bid opening date to ascertain whether any addenda have been issued prior to submitting their bid.

# 1-13 EQUAL OPPORTUNITY

The District recognizes fair and open competition as a basic tenet of public procurement. Bidders doing business with the District are prohibited from discriminating on the basis of race, color, creed, national origin, handicap, age or sex. It is the policy of the District to ensure that qualified bidders wishing to participate in the procurement process have the maximum opportunity to compete and perform on District contracts. The District encourages participation by minority and women business enterprises (MBE/WBE) and requests MBE/WBEs to submit evidence of such designation with their bids. For further information on designation as a minority business enterprise, prospective bidders may contact the District's Finance Office at (850) 539-5999.

# 1-14 ORAL PRESENTATIONS

At its discretion, the District may require any bidder to make an oral presentation of the bid. These presentations provide an opportunity for the bidder to clarify the bid for the District. The District will schedule any such presentations.

# 1-15 NEWS RELEASES

The bidder shall obtain the prior approval of the District for all news releases or other publicity pertaining to this Invitation to Bid or the service, study or project to which it relates.

# 1-16 INSURANCE

The bidder, if awarded a contract, shall maintain insurance coverage reflecting the amounts and conditions specified. In the event the proposer is a governmental entity or a self-insured organization, different insurance requirements may apply. Misrepresentation of any material fact, whether intentional or not, regarding the bidder's insurance coverage, policies or capabilities may be grounds for rejection of the bid and rescission of any ensuing contract.

# 1-17 PUBLIC ENTITY CRIME

A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

# 1-18 DISCRIMINATORY VENDOR LIST

An entity or affiliate who has been placed on the discriminatory vendor list may not submit a bid, proposal, or reply on a contract to provide any goods or services to a public entity; may not submit a bid, proposal, or reply on a contract with a public entity for the construction or repair of a public building or public work; may not submit bids, proposals, or replies on leases of real property to a public entity; may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity; and may not transact business with any public entity.

# 1-19 PROHIBITED CONTACT

Respondents to this solicitation or persons acting on their behalf may not contact, between the release of the solicitation and the end of the 72-hour period following the agency posting the notice of intended award, excluding Saturdays, Sundays, and state holidays, any employee or officer of the District or the executive or legislative branch concerning any aspect of this solicitation, except in writing to the procurement officer or as provided in the solicitation documents. Violation of this provision may be grounds for rejecting a response.

# 1-20 AGENCY INSPECTORS GENERAL

The bidder understands and shall comply with section 20.055(5), Florida Statutes, which states: It is the duty of every state officer, employee, agency, special district, board, commission, contractor, and subcontractor to cooperate with the inspector general in any investigation, audit, inspection, review, or hearing pursuant to this section.

# 1-21 VENDOR CHECKLIST

Please review the checklist for this bid (ITB No. 17B-017) to ensure that you have properly followed the instructions. Many bids and proposals are rejected because the respondent simply failed to comply with required preparation and submission requirements.

| Have you performed a final review of your bid to ensure you included all required documentation?   |
|--|
| Have you verified all amounts to ensure that they are complete and accurate?   |
| Have you signed the Bidder Acknowledgment form (5-1) on page 12 and included it in your package?   |
| Have you completed the Bid Format (5-2) and Bid Sheet (5-3) forms on pages 13 and 14 and included them in your package?                                      |
| IS YOUR ENVELOPE PROPERLY MARKED? See page 5 of this ITB for further details. Most rejected bids are caused by the respondent failing to properly mark their |

|    | PART II  |
|----|--|
|    | Aircraft/Pilots License.   |
|    | Evidence the vendor or employee is a licensed pesticide/herbicide applicator in the State of Florida.  |
|    | Copies of your current insurance coverage, limits, etc.  |
| Th | e following additional documents must be included and attached to your final bid:  |
|    | If applicable, have you completed and included all addenda receipt forms per 1-12?   |
|    | Have you provided evidence of your Minority Business designation, if applicable? Please attach any pertinent documents to the Invitation to Bid package.   |
|    | Have you completed the Vendor Registration and W-9 Forms (attached) and included them in your package?   |
|    | Have you selected the method of shipping that will ensure that your response will arrive before the deadline? Responses received after the date and time specified will not be considered.                       |
|    | package. All incoming correspondence is opened when received unless properly marked for a specified opening date and time. If your bid is opened prior to the designated date and time, it cannot be considered. |

# **SCOPE OF SERVICES**

Please see the attached draft Scope of Work for the complete description of required activities, locations, technical specifications, schedules, instructions, and terms and conditions.

# **PART III**

# INSTRUCTIONS FOR PREPARING BIDS

# 3-1 RULES FOR BIDS

# A. COMPLIANCE

All bids must comply with applicable Florida Statutes, laws and rules.

# B. BID ENVELOPE REQUIREMENTS

One copy of each bid must be submitted in a sealed opaque envelope. The face of the envelope shall state in capital letters:

"SEALED BID ON BID NUMBER 17B-017 TO BE OPENED AUGUST 2, 2017, AT 2:00 P.M. EDT AT THE HEADQUARTERS OF THE NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT."

THE ENVELOPE SHALL ALSO INCLUDE THE RESPONDENT'S NAME AND RETURN ADDRESS. ENVELOPES NOT PROPERLY MARKED WILL NOT BE CONSIDERED.

# C. BID DELIVERY RESPONSIBILITIES

It is the bidder's responsibility to ensure that their bid is delivered properly, including time and place of the opening. Bids which, for any reason, are not so delivered will not be considered. Bids by telegram, telephone or fax will not be accepted. The Northwest Florida Water Management District is located in the Eastern Time Zone, approximately ten (10) miles west of Tallahassee on U.S. Highway 90 at 81 Water Management Drive, Havana, FL 32333.

# D. DISTRICT FORMS

When provided, all bids shall be submitted on forms supplied by the Northwest Florida Water Management District.

# E. BID BONDS

A bid bond will not be required for this project.

# F. CONFLICT OF INTEREST

The award hereunder is subject to Chapter 112, Florida Statutes. All bidders shall disclose with their bids the name of any officer, director, board member or agent who is also an employee of the State of Florida, or any of its agencies. Further, all bidders shall disclose the

name of any state employee or any board member or employee of the District who owns directly or indirectly an interest of five percent (5%) or more in the bidder's firm, subsidiaries or branches.

# G. TAX EXEMPT

The District is not subject to Florida sales tax or to any federal excise taxes on all sales made directly to the District, and neither shall be included in the bid price. Tax exemption forms will be supplied to the successful bidder upon request.

# H. TRANSPORTATION

Any transportation or other charges incurred in the delivery of the product or service as specified must be included in the bid price.

# I. COSTS

All costs whether direct or indirect which will be ultimately paid by the District must be included in the bid price. Any indirect, overhead, profit margin or other such costs, however named, which are reflected as a percentage figure must also be identified in a dollar amount and included in the bid price.

# J. TIE BIDS

Per District policies and procedures, if two equal responses to a solicitation or a request for quote are received and one response is from a certified minority business enterprise, the District shall enter into a contract with the certified minority business enterprise. If this does not resolve the identical proposals, the provisions of Rule 60A-1.011 F.A.C will be applied to determine the successful bidder

# PART IV

# **EVALUATION OF BIDS**

# 4-1 EVALUATION METHOD AND CRITERIA

# 2017 AERIAL SITE PREPARATION PROJECT

The District will evaluate all bids and anticipates awarding the 2017 Aerial Site Preparation Project purchase order based upon the lowest lump sum amount bid for all services.

# PART V BID FORMS

# 5-1 BIDDER ACKNOWLEDGMENT

| I, the undersigned, having read Parts I through VI of this Invitation to Bid, BID NUMBER 1017, and the attached draft "2017 Aerial Site Preparation Project Scope of Work", and having comprehensive understanding of all provisions, rules, requirements, restrictions, etc. contained herein, agree to same and respectfully submit the bid contained herein. |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Authorized Signature  | Position or Title                      |  |  |  |  |  |
| Typed or Printed Name of Above Signature  | Agency or Company                      |  |  |  |  |  |
| Unsigned bids may be rejected by the Agenc Management District.   | y Clerk of the Northwest Florida Water |  |  |  |  |  |
| Candice Costello, Agency Clerk Northwest Florida Water Management District  | -                                      |  |  |  |  |  |

# 5-2 BID FORMAT

| A. E | Business Name            | and Address:                                     |                        |   |
|------|--------------------------|--|------------------------|---|
|      | <del>-</del>             | ence in the aerial applica                       |                        | bicide for site preparation                 |
| C. I | List of subcontr         |  | be used to perform a   | aerial application of chemical              |
| Nam  | <u>ne</u>                | Address  |                        | Type of Firm                                |
|      |                          | erially applied chemical 12 months which the Dis | -                      | reparation projects you completed eference: |
| (Me  | Date<br>onth/Year)       | Location (County/State)                          | Number of Acres        | For Whom                                    |
| The  | following add            | itional documents mus                            | t be included and at   | ttached to your bid:                        |
|      | Copies of yo             | our current insurance co                         | verage, limits, etc.   |   |
|      | Evidence the of Florida. | e vendor or employee is                          | a licensed pesticide/  | herbicide applicator in the State           |
|      | Aircraft/Pilo            | ots License.                                     |                        |   |
|      | Vendor Reg               | istration Form (please ir                        | ndicate minority statu | us)(unless already on file).                |
|      | W-9 Form (               | unless already on file).                         |                        |   |

# 5-3 BID SHEET

# BID SHEET (17B-017) NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT 2017 AERIAL SITE PREPARATION PROJECT

| County     | Stand #                    | Acres | Bid/Acre | Total Bid |  |  |  |  |
|------------|----------------------------|-------|----------|-----------|--|--|--|--|
|            |                            |       |          |           |  |  |  |  |
| Washington | 1                          | 365   | \$       | \$        |  |  |  |  |
|            |                            |       |          |           |  |  |  |  |
| Washington | 2                          | 139   | \$       | \$        |  |  |  |  |
|            |                            |       |          |           |  |  |  |  |
| Washington | 3                          | 14    | \$       | \$        |  |  |  |  |
|            |                            |       |          |           |  |  |  |  |
| Bay        | 4                          | 113   | \$       | \$        |  |  |  |  |
|            |                            |       |          |           |  |  |  |  |
| Bay        | 5                          | 22    | \$       | \$        |  |  |  |  |
|            |                            |       |          |           |  |  |  |  |
|            | GRAND TOTAL (ALL SERVICES) |       |          |           |  |  |  |  |

# Grand Total Lump Sum Bid Amount for 2017 Aerial Site Preparation Project on 653 Acres: \$\_\_\_\_\_ I certify that this bid is made without subsequent understanding, agreement or connection with any corporation, firm, or person submitting a bid for the work described herein, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this bid and certify that I am authorized to sign this bid for the Bidder and that the Bidder is in compliance with all requirements of the Invitation to Bid. Bidder Signature Date Bidder Name (Print or Type) Company Name Bidder Title Address City Area Code Telephone Number Zip State Federal Employers Identification E-mail Address (FEID#) (Use SS # if no FEID #)

# **PART VI**

# DRAFT 2017 AERIAL SITE PREPARATION PROJECT

# 6-1 DRAFT 2017 AERIAL SITE PREPARATION PROJECT SCOPE OF WORK

Please see the attached Draft Scope of Work and exhibit maps. This Scope of Work is subject to change subsequent to legal and administrative review.

# SCOPE OF WORK

# ATTACHMENT TO PURCHASE ORDER BETWEEN THE NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT AND <INSERT CONTRACTOR NAME> FOR THE 2017 AERIAL SITE PREPARATION PROJECT

# **General**

This Scope of Work (SOW) is for the aerial application of chemical herbicide for vegetation management purposes on five clear-cut timber stands to conduct site preparation activities on approximately 653 acres in Bay and Washington counties, Florida, in accordance with the specifications and conditions described in the contract documents. The chemical herbicide application operation will be conducted by <a href="INSERT CONTRACTOR NAME">INSERT CONTRACTOR NAME</a> (CONTRACTOR) for the Northwest Florida Water Management District (DISTRICT).

# **Description of Work**

- **A.** This project will be known as the **2017 AERIAL SITE PREPARATION PROJECT** and consists of the aerial application of chemical herbicide on a clear-cut for vegetation management purposes to conduct site preparation on approximately 653 acres.
- **B.** Individual vegetation management treatment stand location/acreage information to conduct site preparation activities is listed below.

# SITE PREPARATION

| County     | Stand # | Section | Township | Range | Acres | Lat/Long       |
|------------|---------|---------|----------|-------|-------|----------------|
| Washington | 1       | 28/33   | 1N       | 14W   | 365   | 30.451/-85.647 |
| Washington | 2       | 33      | 1N       | 14W   | 139   | 30.441/-85.648 |
| Washington | 3       | 33      | 1N       | 14W   | 14    | 30.443/-85.640 |
| Bay        | 4       | 7       | 1S       | 13W   | 113   | 30.415/-85.580 |
| Bay        | 5       | 5/8     | 1S       | 13W   | 22    | 30.423/-85.570 |

SITE PREPARATION TREATMENT ACREAGE SUBTOTAL 653

**C.** The boundaries of the vegetation management treatment stands are shown on the maps as General Location Exhibit Map A, and Stand Exhibit Maps 1 through 5 which are made a part hereof.

# **Insurance**

The Contractor shall be insured as follows: General Liability, with limits not less than \$1,000,000 per occurrence; \$1,000,000 per occurrence for personal injury; and \$1,000,000 for property damage; Automobile Liability, with combined single limit not less than \$1,000,000; Workers Compensation and Employers' Liability, with limits not less than: Bodily Injury by Accident \$1,000,000 each accident; Bodily Injury by Disease \$1,000,000 policy limit; Bodily Injury by Disease \$1,000,000 each employee. Evidence of all such insurance satisfactory to the DISTRICT shall be furnished prior to beginning operations, and all such insurance policies shall provide for 10 days' notice to the DISTRICT of cancellation or any material change in the terms of the insurance policies. The Contractor shall also provide evidence of aircraft insurance and pilots insurance.

# **Term**

Aerial application of chemical herbicide for vegetation management purposes shall begin on or after the issuance date of a Purchase Order (anticipated to be approximately August 7, 2017) and extend through September 30, 2017. No extensions of time will be considered.

# **Technical Specifications**

- A. The contractor will supply and aerially apply chemical herbicides for vegetation management purposes to site prepare approximately 653 acres from the issuance date of a Purchase Order (anticipated to be approximately August 7, 2017) through September 30, 2017.
- B. Stands will receive the following chemical herbicide treatment on a per-acre basis:
  - 48oz. Chopper Gen II + 16oz. Forestry Garlon XRT + 32 oz. Elite Supreme Surfactant @ 15 GPA  $\,$
- C. The applicator must utilize a GPS flagging system or must fly a 50% cross-coverage pattern to ensure adequate vegetative coverage. A minimum of 95% of each designated treatment unit must be adequately covered with chemical. The contractor shall apply the specified herbicide in the specified locations only and will be held responsible for any offsite (district and non-district lands) impacts associated with the herbicide application.
- D. All empty chemical containers must be lawfully removed from the site. Trash or other debris resulting from the contractor's operations must be removed on a daily basis.

E. Aerial application of chemical herbicides for vegetation management purposes must be completed by September 30, 2017. No extensions of time will be considered.

# Indemnification

The PURCHASER agrees to assume full responsibility and be liable for all damages to persons or property incurred in or resulting from the aerial application of chemical herbicide; except to the extent such damages are due to the negligence or willful misconduct of the DISTRICT, or the DISTRICT'S representatives; and the PURCHASER agrees further, by acceptance of the award of this Agreement, to release, acquit, indemnify, save and hold harmless the DISTRICT, its officers, agents, and representatives from any and all claims, loss, damage, injury and liability, whether for personal injury or otherwise, resulting from, arising out of, or in any way connected with the work to be performed under this Agreement, except to the extent of any claim arising from the negligence or willful misconduct of the DISTRICT.

# **Payment**

The Contractor will be paid a lump sum amount of \$\frac{\\$XX,XXX.XX}{\}\$ within thirty (30) calendar days of receipt of a proper invoice and upon successful completion of the entire aerial application of chemical herbicide vegetation management pine release services. The invoice must be submitted in detail sufficient for a proper preaudit and postaudit thereof. The maximum compensation for this Agreement for services shall not exceed the amount listed below:

# 2017 AERIAL SITE PREPARATION PROJECT

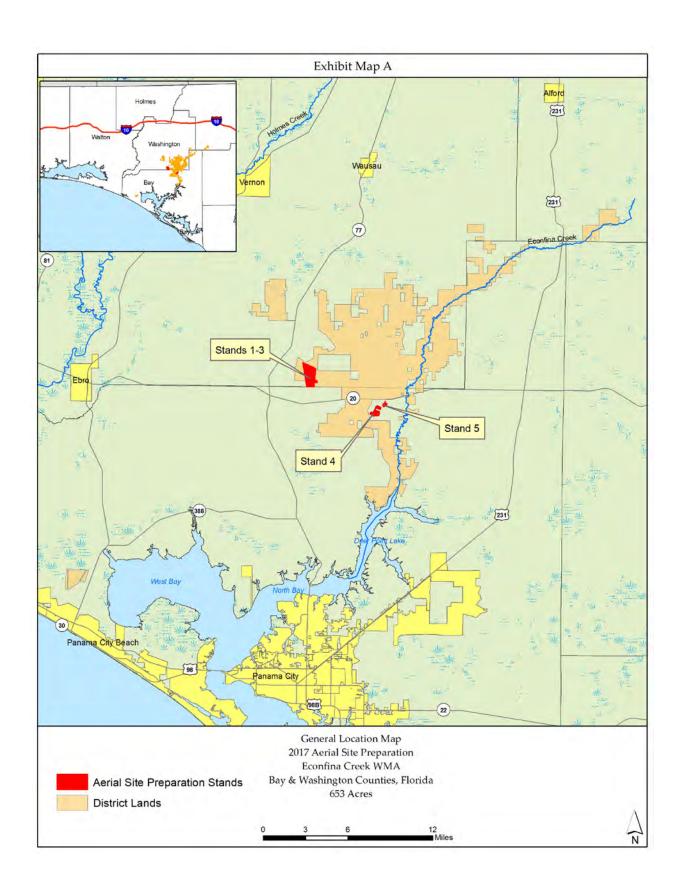
# **\$ XX,XXX.XX**

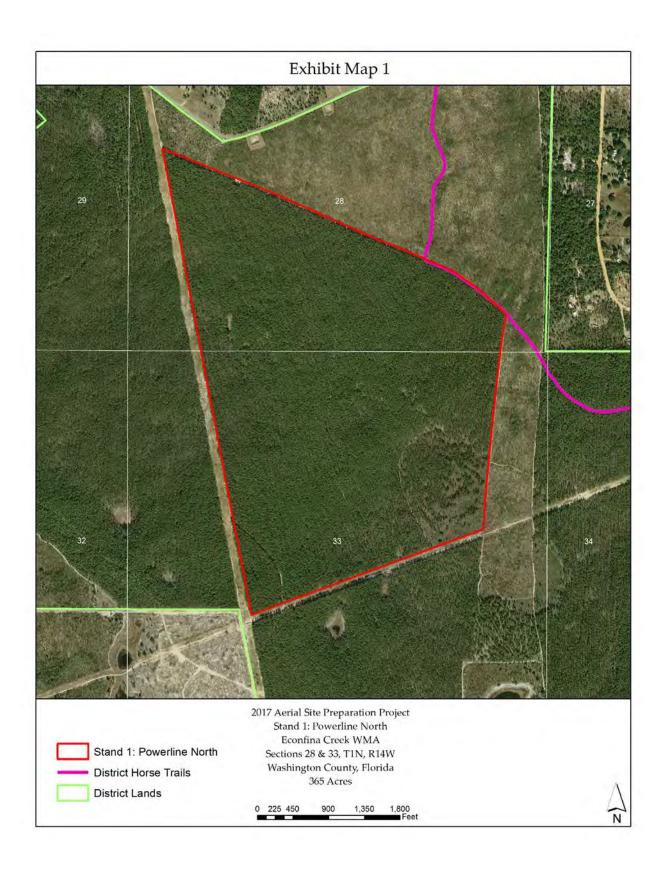
Payment for vegetation management pine release services will be subject to inspection and approval by the Econfina Creek Forestry Land Manager or by the District's Chief, Bureau of Land Management Operations, who will be the project manager. The DISTRICT representative will determine at their sole discretion whether or not the Contractor has successfully completed all phases of the chemical herbicide vegetation management services assignment, and payment will not be made to the Contractor until the District receives written authorization to do so by the District representative.

This SCOPE OF WORK is Agreed to by:

| By:          | Print Name: |
|--------------|-------------|
| Print Title: | Date:       |

<Insert Vendor Name>

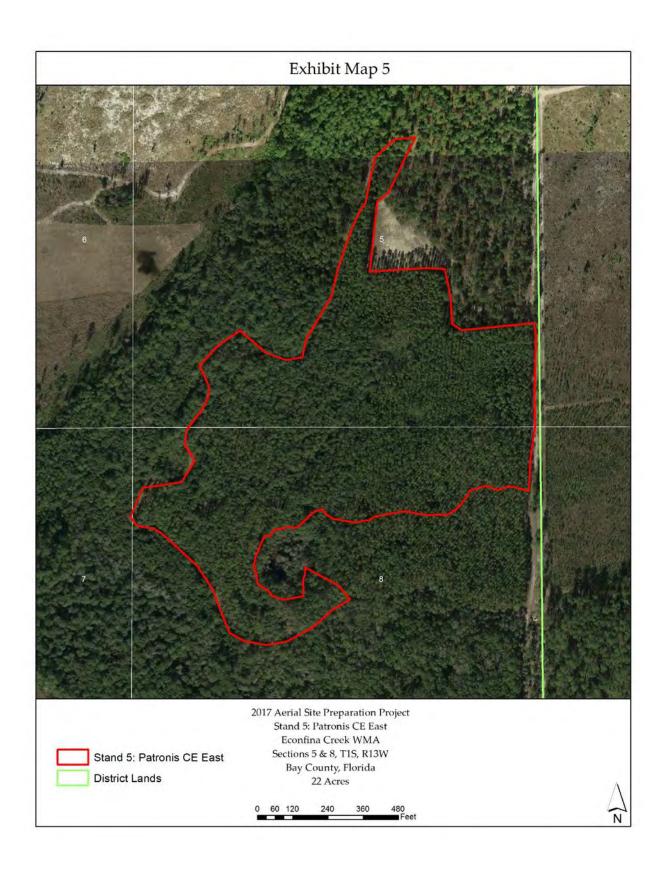












Northwest Florida Water Management District Accounting Section 81 Water Management Drive Havana, FL 32333 Phone (850)539-5999 Fax (850)539-2777

# **VENDOR REGISTRATION FORM**

# **Vendor Information (Please type or print clearly)**

| Date:   |  | FEID or SS Number_  |   |
|---|--|---|---|
| E-mail Address (if applicable):   |  | <del></del>   |   |
| Vendor Name:  |  |   |   |
| Mailing Address:  |  |   |   |
|   | (It is the vendor's responsibility   | to promptly notify the District   | of any change of address.)  |
| City:   |  | State:  | Zip:  |
| Remittance<br>Address:  |  |   |   |
|   | (If c  | lifferent from mailing address)   |   |
| Contact Person:   |  | Title   |   |
| Phone:  | Fax Number:  | То  | II-Free Number:   |
| Check one that best describes you Non-Minority Business Classification  ANon-Minority BSmall Business-State* CSmall Business-Federal EGovernmental Agency GP.R.I.D.E.  *Defined as 100 employees or les | Certified Minority Business Enterprise  HAfrican American IHispanic JAsian/Hawaiian KNative American MAmerican Woman | Non-Certified Minority Business Enterprise  NAfrican American OHispanic PAsian/Hawaiian QNative American RAmerican Woman th and domiciled in Florida. | Non-Profit Organization  S51% or more Minority Board of Directors T51% or more Minority Officers U51% or more Minority community Served VOther Non-Profit |
| To apply for Florida Minority Busin   | ness Certification, call (850) 487   | -0915 to request an application   | on.   |
| This form should be signed  | below by an officer of the   | e company:  |   |
| Signat  | ure  | _   | Date  |

Name and Title (Printed or Typed)



# Request for Taxpayer Identification Number and Certification

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

| micorna   | 11010   | THE COLVES   |                      |                   |                |                    |          |   |                  |               |                  |  |  |
|---|---|--|----------------------|-------------------|----------------|--------------------|----------|---|------------------|---------------|------------------|--|--|
|   | 1 N   | lame (as shown on your income tax return). Name is required on this line; do not leave this line blank.  |                      |                   |                |                    |          |   |                  |               |                  |  |  |
| ge 2.   | <b>2</b> B  | susiness name/disregarded entity name, if different from above   |                      |                   |                |                    |          |   |                  |               |                  |  |  |
| Print or type<br>Specific Instructions on page  | 3 Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:  Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC |  |                      |                   |                |                    |          | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) |                  |               |                  |  |  |
| Ę.ġ   |   | Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners  | '' —                 |                   | .              | <br>xemptio        | •        | •   |                  | rtina         |                  |  |  |
| Print or type   |   | <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.  | n the line           | above to          | C              | ode (if a          | ny) _    |   |                  |               |                  |  |  |
| 집   |   | Other (see instructions) ▶   | _                    |                   |                | oplies to ac       |          |   | d outside        | the U.S       | <i>3.)</i><br>—— |  |  |
| pecif   | 5 A   | ddress (number, street, and apt. or suite no.)   | Reques               | ter's nan         | ne and         | addres             | s (opti  | onal)   |                  |               |                  |  |  |
| See   | <b>6</b> C  | City, state, and ZIP code  |                      |                   |                |                    |          |   |                  |               |                  |  |  |
|   | 7 L   | ist account number(s) here (optional)  |                      |                   |                |                    |          |   |                  |               |                  |  |  |
| Par   | t I   | Taxpayer Identification Number (TIN)   |                      |                   |                |                    |          |   |                  |               | —                |  |  |
|   |   | TIN in the appropriate box. The TIN provided must match the name given on line 1 to ave  | oid                  | Social            | secur          | ity num            | ber      |   |                  |               |                  |  |  |
| backu   | p wi  | thholding. For individuals, this is generally your social security number (SSN). However, for  | or a                 |                   |                |                    |          | Г   |                  |               | T                |  |  |
|   |   | ien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>  |                      |                   |                | -                  |          | -   |                  |               |                  |  |  |
| TIN or  | ,   | , , ,  |                      | or                |                |                    |          | _   |                  |               |                  |  |  |
|   |   | e account is in more than one name, see the instructions for line 1 and the chart on page  |                      |                   | yer ide        | entificat          | ion nu   | ımber   |                  |               |                  |  |  |
|   |   | on whose number to enter.  | 7 101                |                   | 1 [            |                    | П        |   |                  | $\overline{}$ |                  |  |  |
|   |   |  |                      |                   | -              |                    |          |   |                  |               |                  |  |  |
| Par   |   | Certification  |                      |                   |                |                    |          |   |                  |               |                  |  |  |
|   |   | alties of perjury, I certify that:   |                      |                   |                |                    |          |   |                  |               |                  |  |  |
| 1. The  | e nur   | mber shown on this form is my correct taxpayer identification number (or I am waiting for  | a numb               | er to be          | e issu         | ed to m            | ne); ar  | nd  |                  |               |                  |  |  |
| 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 aı   | n a l   | J.S. citizen or other U.S. person (defined below); and   |                      |                   |                |                    |          |   |                  |               |                  |  |  |
| 4. The  | 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.   |  |                      |                   |                |                    |          |   |                  |               |                  |  |  |
| becau<br>interes<br>genera<br>instruc   | se yest pa<br>ally,<br>ction  | on instructions. You must cross out item 2 above if you have been notified by the IRS the ou have failed to report all interest and dividends on your tax return. For real estate transicid, acquisition or abandonment of secured property, cancellation of debt, contributions to payments other than interest and dividends, you are not required to sign the certification, s on page 3. | actions,<br>o an ind | item 2<br>ividual | does<br>etirer | not app<br>ment ar | oly. For | or mo<br>ment   | rtgage<br>(IRA), | and           | J                |  |  |
| Sign<br>Here  |   | Signature of U.S. person ► Da  | ate ▶                |                   |                |                    |          |   |                  |               |                  |  |  |

# **General Instructions**

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

# **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 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, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Form W-9 (Rev. 12-2014) Page **2** 

**Note.** If you are a U.S. person and 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 under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 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 section 1446 withholding on your share of partnership income.

In the cases below, the following person must give 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:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (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, give the requester the appropriate completed Form W-8 or Form 8233.

### **Backup Withholding**

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, payments made in settlement of payment card and third party network transactions, 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 *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

# What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code on page 3 and the Instructions for the Requester of Form W-9 for more information.

# **Updating Your Information**

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

# **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**

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note. ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. 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 line 2.
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Form W-9 (Rev. 12-2014) Page **3** 

#### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

#### Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

#### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 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 U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- $4-\!\mbox{A}$  foreign government or any of its political subdivisions, agencies, or instrumentalities
  - 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- $7\!-\!\mathrm{A}$  futures commission merchant registered with the Commodity Futures Trading Commission
  - 8-A real estate investment trust
- $9-\!$  An entity registered at all times during the tax year under the Investment Company Act of 1940
  - 10-A common trust fund operated by a bank under section 584(a)
  - 11-A financial institution
- $12\!-\!A$  middleman known in the investment community as a nominee or custodian
  - 13-A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

| IF the payment is for  | THEN the payment is exempt for  |
|--|---|
| Interest and dividend payments   | All exempt payees except for 7  |
| Broker transactions  | Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012. |
| Barter exchange transactions and patronage dividends                                   | Exempt payees 1 through 4   |
| Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup> | Generally, exempt payees 1 through 5 <sup>2</sup>   |
| Payments made in settlement of payment card or third party network transactions        | Exempt payees 1 through 4   |

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

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

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B-The United States or any of its agencies or instrumentalities
- C-A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
  - G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of
- I-A common trust fund as defined in section 584(a)
- J-A bank as defined in section 581
- K-A broker
- L-A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note.** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

#### Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

#### Line 6

Enter your city, state, and ZIP code.

# 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 this page), 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 SSA office or get this form online at <a href="https://www.ssa.gov">www.ssa.gov</a>. 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 <a href="https://www.irs.gov/businesses">www.irs.gov/businesses</a> 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 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, apply for a TIN and 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 U.S. entity that has a foreign owner must use the appropriate Form W-8.

Form W-9 (Rev. 12-2014) Page 4

# 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, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code earlier.

Signature requirements. Complete the certification as indicated in items 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 made in settlement of payment card and third party network transactions, 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:   |
|--|---|
| Individual     Two or more individuals (joint account)   | The individual The actual owner of the account or, if combined funds, the first individual on the account |
| Custodian account of a minor<br>(Uniform Gift to Minors Act)   | The minor <sup>2</sup>  |
| a. The usual revocable savings<br>trust (grantor is also trustee)     b. So-called trust account that is<br>not a legal or valid trust under<br>state law  | The grantor-trustee' The actual owner'  |
| <ol><li>Sole proprietorship or disregarded<br/>entity owned by an individual</li></ol>   | The owner <sup>3</sup>  |
| 6. Grantor trust filing under Optional<br>Form 1099 Filing Method 1 (see<br>Regulations section 1.671-4(b)(2)(i)<br>(A))   | The grantor*  |
| For this type of account:  | Give name and EIN of:   |
| 7. Disregarded entity not owned by an individual   | The owner   |
| 8. A valid trust, estate, or pension trust   | Legal entity <sup>4</sup>   |
| Corporation or LLC electing<br>corporate status on Form 8832 or<br>Form 2553   | The corporation   |
| Association, club, religious,<br>charitable, educational, or other tax-<br>exempt organization   | The organization  |
| 11. Partnership or multi-member LLC  | The partnership   |
| 12. A broker or registered nominee   | The broker or nominee   |
| 13. Account with the Department of<br>Agriculture in the name of a public<br>entity (such as a state or local<br>government, school district, or<br>prison) that receives agricultural<br>program payments | The public entity   |
| 14. Grantor trust filing under the Form<br>1041 Filing Method or the Optional<br>Form 1099 Filing Method 2 (see<br>Regulations section 1.671-4(b)(2)(i)<br>(B))  | The trust   |

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.

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

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 2. \*Note. Grantor also must provide a Form W-9 to trustee of trust.

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.

# Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, 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.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039

For more information, see Publication 4535, Identity Theft Prevention and Victim

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. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

# **Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and 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. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Circle the minor's name and furnish the minor's SSN.