



INSTRUCTIONS FOR COMPLETION

Parties interested in doing business with the City of Dayton are encouraged to complete the following registration forms to register that interest with the City.

This process allows potential bidders and suppliers to be registered and entered into our system along with the Commodities and/or Services they can provide. This information is used to develop and maintain current and accurate lists of potential Suppliers to the City. To accomplish this task, we request that you complete the Vendor Application Form and the Commodity/Service List and return to the address or fax number provided below.

Send to:

City of Dayton
Division of Procurement
PO Box 22
Dayton OH 45401

-or-

Purchasing@daytonohio.gov

Reminders:

- Remittances should include both the Vendor Application and the Commodity/Service List forms.
- It is the Vendor's responsibility to maintain approved status in the City of Dayton's Affirmative Action Assurance (AAA) program. The form required is attached and must be signed. Once this is received, it will be sent to the HRC Office for verification. AAA certification is good for 3 years.
- It is the Vendor's responsibility to notify the City of Dayton at the address shown above of any changes to the Vendor's application.

If you have any questions concerning this form, you may contact the Division of Procurement at (937) 333-4030.

Copies of the Vendor Application and W-9 forms may be found on the City's web site at <http://www.daytonohio.gov/bid>. Please take the time to search for your commodity code(s).

It is the policy of the City of Dayton to promote full and equal business opportunity for all persons doing business with the City, and to promote commerce by assisting Minority Business Enterprises, Women's Business Enterprises (MBEs, WBEs), and Small Business Enterprises (SBEs) to actively participate in the City's procurement process for goods, services and construction. If you are a currently certified MBE, WBE, and/or SBE with the City of Dayton Human Relations Council, please include a copy of your certification letter with this application. If you are not certified and would like to apply for certification as MBE, WBE, and/or SBE please begin at <http://daytonhrc.org/business-technical-assistance/affirmative-action-assurance/affirmative-action-assurance-application/> and click on the Certification Packet link.



Nicole Fox
Purchasing Agent

VENDOR APPLICATION

DATE: _____	BUSINESS PHONE NUMBER: _____	FEDERAL ID # OR SOCIAL SECURITY #: _____
E-MAIL ADDRESS (For Purchase Orders and Notifications): _____		FAX NUMBER: _____
1. APPLICANT'S NAME AND MAILING ADDRESS (for Bid Forms and Purchase Orders) _____ Company Name _____ Street Address _____ City, ST, Zip _____		2. MAILING ADDRESS FOR PAYMENTS <input type="checkbox"/> Check here if same as Bid Address _____ Company Name _____ Street Address _____ City, ST, Zip _____
3. VENDOR COMMODITIES HANDLED: See Commodity Code(s) from list located online at http://www.daytonohio.gov/DocumentCenter/View/587 and enter as many codes as needed separated by commas (i.e. 22222, 33333, 44444) <div style="border: 1px solid black; height: 80px; width: 100%;"></div>		
4. PERSONS AUTHORIZED TO SIGN BIDS, QUOTATIONS, PROPOSALS (indicate if Agent) CONTRACTOR: Contractor acknowledges its employees are not public employees for purposes for Ohio Public Employees Retirement System ("OPERS") membership.		
NAME	OFFICIAL CAPACITY	TELEPHONE NO.
_____	_____	_____
_____	_____	_____
_____	_____	_____
5. Your equal opportunity "Affirmative Action Assurance" (AAA) application must be submitted online via www.citybots.com and approved status must be maintained with the City of Dayton's Human Relations Council (HRC). For information about your AAA status, please contact the HRC at (937) 333-1403.		
If you are a currently certified MBE, WBE, and/or SBE with the City of Dayton Human Relations Council, please include a copy of your certification letter with this application. If you are not certified and would like to apply for certification as		
6. MBE, WBE, and/or SBE please begin at http://daytonhrc.org/business-technical-assistance/certification/procurement-enhancement-plan , and then click on the Certification Packet link.		
PROCUREMENT DIVISION USE		
<input type="checkbox"/> ONLY ADD	<input type="checkbox"/> REMOVE	<input type="checkbox"/> CHANGE
		DATE: _____
<input type="checkbox"/> PROCUREMENT: ADD COMMODITY CODE HEADER (###): _____		INITIALS: _____

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2	Business name/disregarded entity name, if different from above.	
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>	
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	6	City, state, and ZIP code	
	7	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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

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); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

**EQUAL EMPLOYMENT OPPORTUNITY (EEO) POLICY
CONFIRMATION**

The Vendor confirms they have an existing equal employment opportunity (EEO) policy that is in compliance with local, state, and federal laws.

The Vendor confirms their EEO policy complies with the City of Dayton's equal employment opportunity policy below:

The vendor shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, ancestry, national origin, place of birth, age, marital status, or handicap. The vendor shall take affirmative action in accordance with the terms outlined in its proposal and the provisions of this contract to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex, sexual orientation, gender identity, ancestry, national origin, place of birth, age, marital status, or handicap. Such action shall include, but not be limited to, the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The vendor agrees to post in conspicuous places, available to employees and applicants, notices to be provided by the city setting forth the provisions of the nondiscrimination clauses.

Authorized Signature

The undersigned authorized representative of the company hereby agrees that a program of affirmative action will be maintained to implement its nondiscrimination policy in doing business with the City of Dayton as described in the City of Dayton Revised Code of General Ordinances (RCGO) Sections 35.14, 35.15 and 35.16 and that the information contained herein is true and correct.

Printed Name: _____

Vendor EIN or SSN # from Application

Title: _____

Signature: _____