



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-

Fax (937) 234-1600

-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.



Melissa A. Wilson
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%; margin-top: 5px;"></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-program , 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

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

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

C Corporation

S Corporation

Partnership

Trust/estate

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

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

6 City, state, and ZIP code

7 List account number(s) here (optional)

Requester's name and address (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.

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

Social security number

				-			-						
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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); 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 ▶ _____

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.

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, later.

**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: _____