

Proposal Document Forms and Instructions		
FORMS		
Proposal Forms	County Supplied	Respondent Supplied
Respondent's Checklist	x	
Statement of Qualifications		x
Proposal-Technical & Cost	X Cost Proposal	X Technical Proposal
Respondent's References Form*	x	
Execution of Proposal	x	
Addenda Acknowledgement Form	x	
Respondent's Affidavit and Non-Collusion Affidavit	x	
Drug-Free Workplace Affidavit	x	
Bidders List Application:		
Completed W-9*	x	
Vendor Application	x	
Contractors Affidavit (E-Verify)	x	
Sub-Contractors Affidavit (E-Verify)	x	
List of Sub-Contractors	x	
Other Documents:		
Current File Copy of Certificate of Insurance		x
Copies of any Licenses/Certifications		x

The forms under "county supplied" are included in the RFP package and are required documents to be completed and returned with your proposal. The forms with an "*" means you may submit your own forms, if you prefer, but a county form is available. The forms under "respondent supplied" are not included in the RFP package and shall be supplied by the respondent.

**OCONEE COUNTY
DEPARTMENT OF FINANCIAL SERVICES – PURCHASING DIVISION**

**COST PROPOSAL FORM
REQUEST FOR PROPOSAL NUMBER (RFP) FY1609-01**

Please use this COST PROPOSAL Form to indicate the cost for this project. Your total cost must include ALL fees, travel, and any other costs needed to complete the project.

I certify that the proposed costs(s) are accurate and reflect any applicable discounts, and that the company, which I represent, will deliver the services and related items for this proposed amount.

By submission of this response, I also certify that the RESPONDENT has read and understands all of the requirements contained in this solicitation, and agrees to be bound by all the terms and conditions contained in this solicitation without exception.

We have included all required documents required per the OFFEROR's Instructions and Specifications.

The Respondent has availed itself of every opportunity to understand the requirements of this solicitation. Therefore, the undersigned respectfully submits this response and any attachments, if required.

DO YOU HAVE AN OCCUPATIONAL TAX LICENSE IN THE STATE OF GEORGIA? _____

LICENSED BY WHAT CITY/COUNTY? _____

OCCUPATIONAL TAX LICENSE# _____ **FEDERAL TAX ID#** _____

INDICATE LEGAL FORM OF BIDDER:

Corporation _____ Partnership _____ Individual _____ Other (specify) _____

DO YOU PLAN TO SUBCONTRACT ANY PORTION OF THIS PROJECT? Yes _____ No _____

THE UNDERSIGNED HEREBY PROPOSES THE ATTACHED TECHNICAL AND COST PROPOSAL TO RFP#FY1609-01, ISSUED BY OCONEE COUNTY ON SEPTEMBER 17, 2015. ANY EXCEPTIONS SHALL BE CLEARLY MARKED IN THE ATTACHED COPY OF THE RFP.

Lump Sum Price\$ _____ Bogart Sports Complex
Trail Renovations

WRITTEN PRICE _____

(Firm/Company-*PRINTED*)

(Address)

(Contractor/Bidder, Title-*PRINTED*)

(Email)

(Signature/Date)

(Phone/Fax)



RFP#FY1609-01
Bogart Sports Complex Trail Renovation

REFERENCES

Please list three (3) references of current customers who can verify the quality of service your company provides. The County prefers customers of similar size and scope of work to this bid. **You may provide your own forms instead of this one for references.**

REFERENCE ONE

Government/Company Name: _____

Address: _____

Contact Person and Title: _____

Phone/Email: _____

Scope of Work: _____

Contract Period: _____

REFERENCE TWO

Government/Company Name: _____

Address: _____

Contact Person and Title: _____

Phone/Email: _____

Scope of Work: _____

Contract Period: _____

REFERENCE THREE

Government/Company Name: _____

Address: _____

Contact Person and Title: _____

Phone/Email: _____

Scope of Work: _____

Contract Period: _____



RFP#FY1609-01
Bogart Sports Complex Trail Renovation

EXECUTION OF PROPOSAL

DATE: _____

The potential Contractor certifies the following by placing an "X" in all blank spaces:

____ That this proposal was signed by an authorized representative of the firm.

____ That the potential Contractor has determined the cost and availability of all materials and supplies associated with performing the services outlined herein.

____ That all labor costs associated with this project have been determined, including all direct and indirect costs.

____ That the potential Contractor agrees to the conditions as set forth in this Request for Proposal with no exceptions.

Therefore, in compliance with the foregoing **Request for Proposal** and subject to all terms and conditions thereof, the undersigned offers and agrees, if this proposal is accepted within ninety (90) days from the date of the opening, to furnish the services for the prices quoted within the time frame required.

Business Name

Authorized Signature Date

Typed Name & Title

THIS PAGE MUST BE COMPLETED AND SUBMITTED AS A PART OF YOUR PROPOSAL



RFP#FY1609-01
Addendum Acknowledgement
Bogart Sports Complex Trail Renovation

THIS FORM MUST BE RETURNED WITH YOUR PROPOSAL

The Respondent has examined and carefully studied the Request for Proposal and the following

Addenda, receipt of all of which is hereby acknowledged:

Addendum No. ____/Date_____

Addendum No. ____/Date_____

Addendum No. ____/Date_____

Addendum No. ____/Date_____

Authorized Representative (Signature)

Date

Authorized Representative/Title
(Print or Type)

Respondents must acknowledge any issued addenda. Proposals that fail to acknowledge the Contractor's receipt of any addendum may result in the rejection of the proposal if the addendum contains information that substantively changes the Owner's requirements.



RESPONDENTS AFFIDAVIT

RFP OPENING DATE/TIME: **October 8, 2015; 2:30 p.m.**

PROJECT NAME: **Bogart Sports Complex Trail Renovation**

STATE OF GEORGIA

OCONEE COUNTY BOARD OF COMMISSIONERS

(Name Printed)

being duly sworn, deposes and says that he/she resides at:

(Address)

and that he/she is the:

(Title)

(Firm Name & Address)

who signed the above Response Form, that he was duly authorized to sign and that the Response is the true offer of the Respondent, that the seal attached is the seal of the Respondent and that all the declarations and statements contained in the Response are true to the best of his knowledge and belief.

(Affiant Signature)

Subscribed and Sworn to before me this _____ Day of _____, 20__

(Notary Public)

My Commission expires _____, 20__

(Seal)



RFP#FY1607-01

NON-COLLUSION AFFIDAVIT

RFP OPENING DATE: **October 8, 2015; 2:30 p.m.**

PROJECT NAME: **Bogart Sports Complex Trail Renovation**

STATE OF GEORGIA

OCONEE COUNTY BOARD OF COMMISSIONERS

being first duly sworn, deposes and says that he is

(sole owner, partner, president, secretary, etc.)

the party making the forgoing Proposal or Bid; that such RFP is genuine and not collusive or sham; that said Respondent has not colluded, conspired, connived, or agreed, directly or indirectly, with any Respondent or person, to put in a sham Response, or that such other person shall refrain from Responding, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the Response Price of affiant or any other Respondent, or to fix any overhead, profit or cost element of said Response Price, or of that of any other Respondent, or to secure any advantage against Oconee County, or any other person interested in the proposed Agreement; and all statements in said Proposal or Bid are true; and further, that such Respondent has not, directly or indirectly submitted this Response, or the contents thereof, or divulged information or data relative thereto to any association or to any member or agent thereof.

(Affiant)

Subscribed and Sworn to before me this _____ Day of _____, 20____

(Notary Public in and for)

(County)

My Commission expires _____, 20____

(SEAL)

THIS FORM MUST BE RETURNED WITH YOUR PROPOSAL.



RFP#FY1609-01

Bogart Sports Complex Trail Renovation

DRUG FREE WORKPLACE CERTIFICATE

By signature on this certificate, the contractor certifies that the provisions of O.C.G.A. Section 50-24-1 through 50-24-6 related to the "Drug-Free Workplace Act" has been complied with in full. The contractor further certifies that:

1. A drug-free workplace will be provided for the contractor's employees during the performance of the contract; and
2. Each contractor who hires a subcontractor to work in a drug-free workplace shall secure from that subcontractor the following written certification: "As part of the subcontracting agreement with (contractors name), (subcontractor's name) certifies to the contractor that a drug-free workplace will be provided for the subcontractor's employees during the performance of this contract pursuant to O.C.G.A. Section 50-24- 3(b) (7)."

By signature on this certificate, the contractor further certifies that it will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of this contract.

Contractor: _____

By: _____

Name (Printed): _____

Title: _____

Date: _____

THIS FORM MUST BE RETURNED WITH YOUR BID.

MANDATORY DOCUMENT

**OCONEE COUNTY BOARD OF COMMISSIONERS
BIDDER'S LIST APPLICATION
PURCHASING OFFICE**

FOR GOVERNMENT USE ONLY

APPLICATION# _____

VENDOR# _____

1. Occupational Tax License # _____ (Include Photocopy of Occupational Tax License)

2. Application Type: _____ New _____ Revised _____ Date: _____

3. Company Tax ID Number: _____

4. Firm Organization: _____ Sole Proprietor _____ Corporation _____ Non-Profit: _____ Partnership _____ Limited Liability

5. Applicant Bid Request & Purchase Order Address.

Include the address that Oconee County should use to send bid requests and purchase order information.

Company Name: _____

Main Address: _____

City, State & Zip _____

Telephone Number: _____ Cell Phone: _____

Fax Number: _____ E-mail address: _____

Contact Person: _____ Title: _____

6. Applicant Remittance Address

Include the address that Oconee County should use to make payment for goods and services received from your company (if different than above)

Company Name: _____

Remittance: _____

City, State & Zip _____

Telephone Number: _____ Cell Phone: _____

Fax Number: _____ E-mail address: _____

Contact Person: _____ Title: _____

7. Commodity Codes -- Choose applicable codes(s) attached that relate to your business (this is how your company will be cross-referenced in our database). For a complete list of codes, please visit the Georgia Procurement Registry website: [NIGP Code List](#)

Commodity Code _____ Commodity Description _____

Commodity Code _____ Commodity Description _____

Commodity Code _____ Commodity Description _____

8. Can County place orders on the Website? _____ Can County pay with Credit Card? _____

Website Address: _____ Website Email (if different from above) _____

9. Principal line of Business: Please attach your company's line and/or detailed description of services.

10. Other municipalities to whom your company submits bids? _____

11. Authorized Signature: _____

Printed Name: _____ Date/Time: _____

Mail application to:
Oconee County Finance Department
P.O. Box 1527
Watkinsville, GA 30677

Contact Information:
Karen T. Barnett, CPPB
706-769-2944
E-Mail application to: kbarnett@oconee.ga.us

Physical Address:
Oconee County BOC
23 N. Main St.
Watkinsville, GA 30677

Form **W-9**
(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:
☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
☐ Other (see instructions) ▶ _____

Exemptions (see instructions):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

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

City, state, and ZIP code

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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

____ - ____ - ____

Employer identification number

____ - ____ - ____

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

Part II Certification

Under penalties of perjury, I certify that:

- 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
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- 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 on page 3.

Sign Here **Signature of U.S. person ▶** **Date ▶**

General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

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

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

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- 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.

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 6 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.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage 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* on page 1.

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

Name

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

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

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

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

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 Regulation section 301.7701-2(c)(2)(ii). Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must 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 the "Name" line. 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 the "Business name/disregarded entity name" line. 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.

Note. Check the appropriate box for the U.S. federal tax classification of the person whose name is entered on the "Name" line (individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the U.S. federal tax classification in the space provided. If you are an LLC that is treated as a partnership for U.S. federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation, as appropriate. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for U.S. federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

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

Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the *Exemptions* box, any code(s) that may apply to you. See *Exempt payee code* and *Exemption from FATCA reporting code* on page 3.

Exempt payee code. Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.

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

The following codes identify payees that are exempt from backup withholding:

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States
- 7—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 684 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 G 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 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² 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, 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—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 possession of the United States, 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 Reg. 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 Reg. 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 1940

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 684 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Part I. Taxpayer Identification Number (TIN)

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

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

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

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

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses 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.

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 the "Name" line must sign. Exempt payees, see *Exempt payee code* earlier.

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

- 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.
- 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.
- Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
- 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).
- Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ³ The actual owner ⁴
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor ³
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 ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-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 Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

¹ 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.

² Circle the minor's name and furnish the minor's SSN.

³ 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.

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

*Note. 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, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

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

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 Assistance.

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 1-877-777-4776 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 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.

COMMODITY CLASS LIST

Choose applicable code(s) attached that relate to your business (this is how your company will be cross-referenced in our database). For a complete list of codes, please visit the Georgia DOAS website: http://ssl.doas.state.ga.us/PRSapp/PR_public_routing.jsp?route_code=nigp_list.

005	ABRASIVES
010	ACOUSTICAL TILE, INSULATING MATERIALS, AND SUPPLIES
015	ADDRESSING, COPYING, MIMEOGRAPH, AND SPIRIT DUPLICATING MACHINE SUPPLIES: CHEMICALS, INKS, PAPER, ETC.
019	AGRICULTURAL CROPS AND GRAINS INCLUDING FRUITS, MELONS, NUTS, AND VEGETABLES
020	AGRICULTURAL EQUIPMENT, IMPLEMENTS, AND ACCESSORIES (SEE CLASS 22 FOR PARTS)
022	AGRICULTURAL IMPLEMENT AND ACCESSORY PARTS
025	AIR COMPRESSORS AND ACCESSORIES
031	AIR CONDITIONING, HEATING, AND VENTILATING: EQUIPMENT, PARTS AND ACCESSORIES (SEE RELATED ITEMS IN CLASS 740)
035	AIRCRAFT AND AIRPORT, EQUIPMENT, PARTS, AND SUPPLIES
037	AMUSEMENT, DECORATIONS, ENTERTAINMENT, TOYS, ETC.
040	ANIMALS, BIRDS, MARINE LIFE, POULTRY, INCLUDING ACCESSORY ITEMS (LIVE)
045	APPLIANCES AND EQUIPMENT, HOUSEHOLD TYPE
050	ART EQUIPMENT AND SUPPLIES
052	ART OBJECTS
055	AUTOMOTIVE ACCESSORIES FOR AUTOMOBILES, BUSES, TRUCKS, ETC.
060	AUTOMOTIVE MAINTENANCE ITEMS AND REPAIR/REPLACEMENT PARTS
065	AUTOMOTIVE BODIES, ACCESSORIES, AND PARTS
070	AUTOMOTIVE VEHICLES AND RELATED TRANSPORTATION EQUIPMENT
075	AUTOMOTIVE SHOP EQUIPMENT AND SUPPLIES
080	BADGES, EMBLEMS, NAMETAGS AND PLATES, JEWELRY, ETC.
085	BAGS, BAGGING, TIES, AND EROSION CONTROL EQUIPMENT
090	BAKERY EQUIPMENT, COMMERCIAL
095	BARBER AND BEAUTY SHOP EQUIPMENT AND SUPPLIES
100	BARRELS, DRUMS, KEGS, AND CONTAINERS
105	BEARING (EXCEPT WHEEL BEARINGS AND SEALS -- SEE CLASS 060)
110	BELTS AND BELTING: CONVEYOR, ELEVATOR, POWER TRANSMISSION, AND V-BELTS
115	BIOCHEMICALS, RESEARCH
120	BOATS, MOTORS, AND MARINE AND WILDLIFE SUPPLIES
125	BOOKBINDING SUPPLIES
135	BRICKS AND OTHER CLAY PRODUCTS, REFRACTORY MATERIALS, AND STONE PRODUCTS
140	BROOM, BRUSH, AND MOP MANUFACTURING MACHINERY AND SUPPLIES
145	BURSHES (NOT OTHERWISE CLASSIFIED)
150	BUILDER'S SUPPLIES
155	BUILDING AND STRUCTURES: FABRICATED AND PREFABRICATED
160	BUTCHER SHOP AND MEAT PROCESSING EQUIPMENT
165	CAFETERIA AND KITCHEN EQUIPMENT, COMMERCIAL
175	CHEMICAL LABORATORY EQUIPMENT AND SUPPLIES
180	CHEMICAL RAW MATERIALS (IN LARGE QUANTITIES PRIMARILY FOR MANUFACTURING JANITORIAL AND LAUNDRY PRODUCTS)
190	CHEMICALS AND SOLVENTS, COMMERCIAL (IN BULK)
192	CLEANING COMPOSITIONS, DETERGENTS, SOLVENTS, AND STRIPPERS - PREPACKAGED
193	CLINICAL LABORATORY REAGENTS AND TESTS (BLOOD GROUPING, DIAGNOSTIC, DRUG MONITORING, ETC.)
195	CLOCKS, TIMERS, WATCHES, AND JEWELERS' AND WATCHMAKERS' TOOLS AND EQUIPMENT
200	CLOTHING, ATHLETIC, CASUAL, DRESS, UNIFORM, WEATHER RELATED, WORK

201 CLOTHING ACCESSORIES (SEE CLASS 800 FOR SHOES AND BOOTS)
 204 COMPUTER HARDWARE AND PERIPHERALS FOR MICROCOMPUTERS
 206 COMPUTER HARDWARE AND PERIPHERALS FOR MINI AND MAINFRAME COMPUTERS
 207 COMPUTER ACCESSORIES AND SUPPLIES
 208 COMPUTER SOFTWARE FOR MICROCOMPUTERS (PREPROGRAMMED)
 209 COMPUTER SOFTWARE FOR MINI AND MAINFRAME COMPUTERS (PREPROGRAMMED)
 210 CONCRETE AND METAL CULVERTS, PILINGS, SEPTIC TANKS, ACCESSORIES AND SUPPLIES
 220 CONTROLLING, INDICATING, MEASURING, MONITORING, AND RECORDING EQUIPMENT AND SUPPLIES
 225 COOLERS, DRINKING WATER (WATER FOUNTAINS)
 232 CRAFTS, GENERAL
 233 CRAFTS, SPECIALIZED
 240 CUTLERY, DISHES, FLATWARE, GLASSWARE, TRAYS, UTENSILS, AND SUPPLIES
 245 DAIRY EQUIPMENT AND SUPPLIES
 250 DATA PROCESSING CARDS AND PAPER
 255 DECALS AND STAMPS
 260 DENTAL EQUIPMENT AND SUPPLIES
 265 DRAPERIES, CURTAINS, AND UPHOLSTERY MATERIAL (INCLUDING AUTOMOBILE)
 269 DRUGS AND PHARMACEUTICALS
 271 DRUGS, PHARMACEUTICALS, AND SETS (FOR LARGE-VOLUME PARENTERAL ADMINISTRATION, INFUSION, IRRIGATION, AND TUBE FEEDING)
 280 ELECTRICAL CABLES AND WIRES (NOT ELECTRONIC)
 285 ELECTRICAL EQUIPMENT AND SUPPLIES (EXCEPT CABLE AND WIRE)
 287 ELECTRONIC COMPONENTS, REPLACEMENT PARTS, AND ACCESSORIES: AND MISCELLANEOUS ELECTRONIC EQUIPMENT (NOT FOR TESTING OR ANALYZING-SEE 730)
 290 ENERGY COLLECTING EQUIPMENT AND ACCESSORIES: SOLAR AND WIND
 295 ELEVATORS AND ESCALATORS, BUILDING TYPE
 305 ENGINEERING EQUIPMENT, SURVEYING EQUIPMENT, DRAWING INSTRUMENTS, AND SUPPLIES
 310 ENVELOPES, PLAIN OR PRINTED
 315 EPOXY BASED FORMULATIONS FOR ADHESIVES, COATING, AND RELATED AGENTS
 318 FARE COLLECTION EQUIPMENT AND SUPPLIES
 320 FASTENING, PACKAGING, STRAPPING, TYPING EQUIPMENT AND SUPPLIES
 325 FEED, BEDDING, VITAMINS AND SUPPLEMENTS FOR ANIMALS (SEE CLASS 875 FOR DRUGS AND PHARMACEUTICALS FOR ANIMALS)
 330 FENCING
 335 FERTILIZERS AND SOIL CONDITIONERS
 340 FIRE PROTECTION EQUIPMENT AND SUPPLIES
 345 FIRST AID AND SAFETY EQUIPMENT AND SUPPLIES (EXCEPT NUCLEAR AND WELDING)
 350 FLAGS, FLAG POLES, BANNERS, AND ACCESSORIES
 360 FLOOR COVERING, FLOOR COVERING INSTALLATION AND REMOVAL EQUIPMENT, AND SUPPLIES
 365 FLOOR MAINTENANCE MACHINES, PARTS, AND ACCESSORIES
 370 FOOD PROCESSING AND CANNING EQUIPMENT AND SUPPLIES
 375 FOODS: BAKERY PRODUCTS (FRESH)
 380 FOODS: DAIRY PRODUCTS (FRESH)
 385 FOODS: FROZEN
 390 FOODS: PERISHABLE
 393 FOODS: STAPLE GROCERY AND GROCER'S MISCELLANEOUS ITEMS
 395 FORMS, CONTINUOUS: COMPUTER PAPER, FORM LABELS, SNAP-OUT FORMS, AND FOLDERS FOR FORMS
 400 FOUNDRY CASTINGS, EQUIPMENT, AND SUPPLIES
 405 FUEL, OIL, GREASE AND LUBRICANTS
 410 FURNITURE: HEALTHCARE AND HOSPITAL FACILITY
 415 FURNITURE: LABORATORY
 420 FURNITURE: CAFETERIA, CHAPEL, DORMITORY, HOUSEHOLD, LIBRARY, LOUNGE, SCHOOL

425 FURNITURE: OFFICE
 430 GASES, CONTAINERS, EQUIPMENT: LABORATORY, MEDICAL AND WELDING
 435 GERMICIDES, CLEANERS AND RELATED SANITATION PRODUCTS FOR HEALTHCARE PERSONNEL
 440 GLASS AND GLAZING SUPPLIES
 445 HAND TOOLS (POWERED AND NON-POWERED), ACCESSORIES AND SUPPLIES
 450 HARDWARE ANDS RELATED ITEMS
 460 HOSE, ACCESSORIES AND SUPPLIES: INDUSTRIAL, COMMERCIAL AND GARDEN
 465 HOSPITAL AND SURGICAL EQUIPMENT, INSTRUMENTS, AND SUPPLIES
 470 HOSPITAL HANDICAP AND RELATED SPECIALIZED EQUIPMENT AND SUPPLIES: MOBILITY, SPEECH IMPAIRED AND RESTRAINT ITEMS
 475 HOSPITAL, SURGICAL AND RELATED MEDICAL ACCESSORIES AND SUNDRY ITEMS
 485 JANITORIAL SUPPLIES
 490 LABORATORY EQUIPMENT AND ACCESSORIES (FOR GENERAL ANALYTICAL AND RESEARCH USE) NUCLEAR, OPTICAL AND PHYSICAL
 493 LABORATORY EQUIPMENT AND ACCESSORIES: BIOCHEMISTRY, CHEMISTRY, ENVIRONMENTAL SCIENCE, ETC.
 495 LABORATORY AND FIELD EQUIPMENT AND SUPPLIES: BIOLOGY, BOTANY, GEOLOGY, MICROBIOLOGY, ZOOLOGY, ETC.
 500 LAUNDRY AND DRY CLEANING EQUIPMENT, ACCESSORIES, PARTS AND SUPPLIES – COMMERCIAL
 505 LAUNDRY AND DRY CLEANING COMPOUNDS AND SUPPLIES
 510 LAUNDRY TEXTILES AND SUPPLIES
 515 LAWN MAINTENANCE EQUIPMENT, ACCESSORIES, AND PARTS (NON-AGRICULTURAL APPLICATIONS)
 520 LEATHER AND RELATED EQUIPMENT, PRODUCTS, ACCESSORIES, AND SUPPLIES
 525 LIBRARY AND ARCHIVAL EQUIPMENT, MACHINES AND SUPPLIES
 530 LUGGAGE, BRIEF CASES, PURSES AND RELATED ITEMS
 540 LUMBER AND RELATED PRODUCTS
 545 MACHINERY AND HARDWARE, INDUSTRIAL
 550 MARKERS, PLAQUES AND TRAFFIC CONTROL DEVICES
 555 MARKIGN AND STENCILING DEVICES
 556 MASS TRANSPORTATION – TRANSIT BUS
 557 MASS TRANSPORTATION – TRANSIT BUS ACCESSORIES AND PARTS
 558 MASS TRANSPORTATION – RAIL VEHICLES AND SYSTEMS
 559 MASS TRANSPORTATION – RAIL VEHICLE PARTS AND ACCESSORIES
 560 MATEIAL HANDLING AND STORAGE EQUIPMENT AND ALLIED ITEMS
 565 MATTRESS MANUFACTURING MACHINERY AND SUPPLIES
 570 METALS: BARS, PLATES, RODS, SHEETS, STRIPS, STRUCTURAL SHAPES, TUBING AND FABRICATED ITEMS
 575 MICORFICHE AND MICROFILM EQUIPMENT, ACCESSORIES AND SUPPLIES
 578 MISCELLANEOUS PRODUCTS
 580 MUSICAL INSTRUMENTS, ACCESSORIES AND SUPPLIES
 590 NOTIONS AND RELATED SEWING ACCESSORIES AND SUPPLIES
 595 NURSERY STOCK EQUIPMENT AND SUPPLIES
 600 OFFICE MACHINES, EQUIPMENT AND ACCESSORIES
 605 OFFICE MECHANICAL AIDS, SMALL MACHINES AND APPARATUSES
 610 OFFICE SUPPLIES; CARBON PAPER AND ROBBONS – ALL TYPES
 615 OFFICE SUPPLIES : GENERAL
 620 OFFICE SUPPLEIS: ERASERS, INKS, LEADS, PENS, PENCILS, ETC.
 625 OPTICAL EQUIPMENT, ACCESSORIES AND SUPPLIES
 630 PAINT, PROTECTIVE COATINGS, VARNISH, WALLPAPER AND RELATED PRODUCTS
 635 PAINTING EQUIPMENT AND ACCESSORIES
 640 PAPER AND PLASTIC PRODUCTS, DISPOSAL
 645 PAPER (FOR OFFICE AND PRINT SHOP USE)

650 PARK, PLAYGROUND, RECREATIONAL AREA AND SWIMMING POOL EQUIPEMNT
 652 PERSONAL HYGIENE AND GROOMING EQUIPMENT AND SUPPLIES
 655 PHOTOGRAPHIC EQUIPMENT AND SUPPLIES (NOT INCLUDING GRAPHIC ARTS, MICROFILM AND X-RAY)
 658 PIPE AND TUBING
 659 PIPE AND TUBING FITTINGS
 660 PIPES, TOBACCOS, SMOKING ACCESSORIES; ALCOHOLIC BEVERAGES
 665 PLASTICS, RESINS, FIBERGLASS: CONSTRUCTION, FORMING, LAMINATING AND MOLDING EQUIPMENT, ACCESSORIES AND SUPPLIES
 670 PLUMBING EQUIPMENT, FIXTURES AND SUPPLIES
 675 POISONS: AGRICULTURAL AND INDUSTRIAL
 680 POLICE EQUIPMENT AND SUPPLIES
 685 POULTRY EQUIPMENT AND SUPPLIES
 690 POWER GENERATION EQUIPMENT, ACCESSORIES AND SUPPLIES
 691 POWER TRANSMISSION EQUIPMENT - ELECTRICAL, MECHANICAL, AIR AND HYDRAULIC
 700 PRINTING PLANT EQUIPMENT AND SUPPLIES (EXCEPT PAPERS)
 710 PROSTHETIC DEVICES, HEARING AIDS, AUDITORY TESTING EQUIPMENT, ELECTRONIC READING DEVICES, ETC.
 715 PUBLICATIONS AND AUDIOVISUAL MATERIALS (PREPARED MATERIALS ONLY, NOT EQUIPMENT, SUPPLIES OR PRODUCTION, SEE CLASS 785 FOR INSTRUCTIONAL AIDS)
 720 PUMPING EQUIPMENT AND ACCESSORIES
 725 RADIO COMMUNICATION, TELEPHONE AND TELECOMMUNICATION EQUIPMENT, ACCESSORIES AND SUPPLIES
 730 RADIO COMMUNICATION AND TELECOMMUNICATION TESTING, MEASURING AND ANALYZING EQUIPMENT, ACCESSORIES AND SUPPLIES
 735 RAGS, SHOP TOWELS AND WIPING CLOTHS
 740 REFRIGERATION EQUIPMENT AND ACCESSORIES
 745 ROAD AND HIGHWAY BUILDING MATERIALS (ASPHALTIC)
 750 ROAD AND HIGHWAY BUILDING MATERIALS (NOT ASPHALTIC)
 755 ROAD AND HIGHWAY EQUIPMENT AND PARTS: ASPHALT AND CONCRETE HANDLING AND PROCESSING
 760 ROAD AND HIGHWAY EQUIPMENT: EARTH HANDLING, GRADING, MOVING PACKING, ETC.
 765 ROAD AND HIGHWAY EQUIPMENT (EXCEPT ASPHALT, CONCRETE AND EARTH HANDLING EQUIPMENT IN CLASSES 755 AND 760)
 770 ROOFING
 775 SALT (SODIUM CHLORIDE) (SEE CLASS 393 FOR TABLE SALT)
 780 SCALES AND WEIGHING APPARATUS (SEE 175-08 FOR LABORATORY BALANCES)
 785 SCHOOL EQUIPMENT AND SUPPLIES
 790 SEED, SOD, SOIL AND INOCULANTS
 795 SEWING ROOM AND TEXTILE MACHINERY AND ACCESSORIES
 800 SHOES AND BOOTS
 801 SIGNS, SIGN MATERIALS, SIGN MAKING EQUIPMENT AND RELATED SUPPLIES
 803 SOUND SYSTEMS, COMPONENTS AND ACCESSORIES: GROUP INTERCOM, MUSIC, PUBLIC ADDRESS, ETC.
 805 SPORTING GOODS, ATHLETIC EQUIPMENT AND ATHLETIC FACILITY EQUIPMENT
 810 SPRAYING EQUIPMENT (EXCEPT HOUSEHOLD, NURSERY PLANT AND PAINT)
 815 STEAM AND HOT WATER FITTINGS, ACCESSORIES AND SUPPLIES
 820 STEAM AND HOT WATER BOILERS AND STEAM HEATING EQUIPMENT
 825 STOCKMAN EQUIPMENT AND SUPPLIES
 830 TANKS (METAL, WOOD AND SYNTHETIC MATERIALS): MOBILE, PORTABLE STATIONARY AND UNDERGROUND TYPES
 832 TAPE (NOT DATA PROCESSING, MEASURING, OPTICAL, SEWING, SOUND OR VIDEO)
 840 TELEVISION EQUIPMENT AND ACCESSORIES
 845 TESTING APPARATUS AND INSTRUMENTS (NOT FOR ELECTRICAL OR ELECTRONIC MEASUREMENTS)

850 TEXTILES, FIBERS, HOUSEHOLD LINENS AND PIECE GOODS
 855 THEATRICAL EQUIPMENT AND SUPPLIES
 860 TICKETS, COUPON BOOKS, SALES BOOKS, STRIP BOOKS, ETC.
 863 TIRES AND TUBES
 864 TRAIN CONTROLS, ELECTRONICS
 865 TWINE
 870 VENETIAN BLINDS, AWNINGS AND SHADES
 875 VETERINARY EQUIPMENT AND SUPPLIES (SEE CLASS 325 FOR VITAMINS AND SUPPLEMENTS FOR ANIMALS)
 880 VISUAL EDUCATION EQUIPMENT AND SUPPLIES (EXCEPT PROJECTION LAMPS – SEE CLASS 285)
 883 VOICE RESPONSE SYSTEMS
 885 WATER AND WASTEWATER TREATING CHEMICALS
 890 WATER SUPPLY, GROUNDWATER, SEWAGE TREATMENT AND RELATED EQUIPMENT (NOT FOR AIR CONDITIONING, STEAM BOILER OR LABORATORY REAGENT WATER)
 895 WELDING EQUIPMENT AND SUPPLIES
 898 X-RAY AND OTHER RADIOLOGICAL EQUIPMENT AND SUPPLIES (MEDICAL)
 905 AIRCRAFT OPERATIONS SERVICES
 906 ARCHITECTURAL SERVICES, PROFESSIONAL
 907 ARCHITECTURAL AND ENGINEERING SERVICES, NON-PROFESSIONAL
 908 BOOKBINDING, REBINDING AND REPAIRING
 909 BUILDING CONSTRUCTION SERVICES, NEW
 910 BUILDING MAINTENANCE AND REPAIR SERVICES
 912 CONSTRUCTION SERVICES, GENERAL
 913 CONSTRUCTION SERVICES, HEAVY
 914 CONSTRUCTION SERVICES, TRADE (NEW CONSTRUCTION)
 915 COMMUNICATIONS AND MEDIA RELATED SERVICES
 918 CONSULTING SERVICES
 920 DATA PROCESSING SERVICES AND SOFTWARE
 924 EDUCATIONAL SERVICES
 925 ENGINEERING SERVICES, PROFESSIONAL
 926 ENVIRONMENTAL AND ECOLOGICAL SERVICES
 928 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES FOR AUTOMOBILES, TRUCKS, TRAILERS, TRANSIT BUSES AND OTHER VEHICLES
 929 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES – AGRICULTURAL, HEAVY INDUSTRIAL EQUIPMENT AND MARINE EQUIPMENT
 931 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES – APPLIANCE, ATHLETIC, CAFETERIA, FURNITURE, MUSICAL INSTRUMENTS AND SEWING EQUIPMENT
 934 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES – LAUNDRY, LAWN, PAINTING, PLUMBING AND SPRAYING EQUIPMENT
 936 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES – GENERAL EQUIPMENT
 938 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES – HOSPITAL, LABORATORY AND TESTING EQUIPMENT
 939 EQUIPMENT MAINTENANCE, RECONDITIONING AND REPAIR SERVICES – OFFICE, PHOTOGRAPHIC AND RADIO/TELEVISION EQUIPMENT
 940 EQUIPMENT MAINTENANCE, REPAIR CONSTRUCTION AND RELATED SERVICES – RAILROAD
 941 EQUIPMENT MAINTENANCE, RECONDITIONING, REPAIR AND RELATED SERVICES – POWER GENERATION
 945 FISHING, HUNTING, TRAPPING, GAME PROPAGATION AND RELATED SERVICES
 946 FINANCIAL SERVICES
 947 FORESTRY SERVICES
 948 HEALTH RELATED SERVICES (FOR HUMAN SERVICES SEE CLASS 952)
 952 HUMAN SERVICES
 953 INSURANCE, ALL TYPES
 954 LAUNDRY AND DRY CLEANING SERVICES
 956 LIBRARY SERVICES (SEE CLASS 908 FOR BOOKBINDING, REBINDING AND REPAIRING)

- 958 MANAGEMENT SERVICES
- 959 MARINE CONSTRUCTION SERVICES; MARINE EQUIPMENT MAINTENANCE AND REPAIR;
RELATED MARINE SERVICES
- 961 MISCELLANEOUS PROFESSIONAL SERVICES
- 962 MISCELLANEOUS SERVICES
- 965 PRINTING PREPARATIONS: ETCHING, PHOTOENGRAVING AND PREPARATION OF MATS,
NEGATIVES AND PLATES
- 966 PRINTING AND RELATED SERVICES
- 968 PUBLIC WORKS AND RELATED SERVICES
- 971 REAL PROPERTY RENTAL OR LEASE
- 975 RENTAL OR LEASE SERVICES OF EQUIPMENT – AGRICULTURAL, AIRCRAFT, AUTOMOTIVE,
HEAVY EQUIPMENT AND MARINE EQUIPMENT
- 977 RENTAL OR LEASE SERVICES OF EQUIPMENT – APPLIANCES, CAFETERIA, FILM, FURNITURE,
HARDWARE, MUSICAL, SEWING AND WINDOW AND FLOOR COVERINGS
- 979 RENTAL OR LEASE SERVICES OF EQUIPMENT – ENGINEERING, HOSPITAL, LABORATORY,
PRECISION INSTRUMENTS, REFRIGERATION, SCALES AND TESTING EQUIPMENT
- 981 RENTAL OR LEASE OF EQUIPMENT – GENERAL EQUIPMENT
- 983 RENTAL OR LEASE SERVICES OF EQUIPMENT – CLOTHING, JANITORIAL, LAUNDRY, LAWN,
PAINTING, SPRAYING AND TEXTILE EQUIPMENT
- 984 RENTAL OR LEASE SERVICES OF COMPUTERS, DATA PROCESSING AND WORD PROCESSING
EQUIPMENT
- 985 RENTAL OR LEASE SERVICES OF EQUIPMENT – OFFICE, PHOTOGRAPHIC, PRINTING,
RADIO/TELEVISION/TELEPHONE EQUIPMENT
- 988 ROADSIDE, GROUNDS, RECREATIONAL AND PARK AREA SERVICES
- 989 SAMPLING AND SAMPLE PREPARATION SERVICES (FOR TESTING)
- 990 SECURITY, FIRE, SAFETY AND EMERGENCY SERVICES
- 992 TESTING AND CALIBRATION SERVICES
- 998 SALE OF SURPLUS & OBSOLETE ITEMS

What Your Business Needs to Know about Georgia's E-Verify Requirements (Effective July 1, 2013)

E-Verify Contractor Requirements

Georgia law, O.C.G.A. § 13-10-91, requires all businesses that contract with a public employer for labor or services by bid or by contract in which the labor or services exceed \$2499.99 to sign an affidavit attesting that they are registered for and use E-Verify unless 1) the contractor has no employees (in which case they must present an approved state issued identification card/drivers' license from an approved state as provided on the Attorney General's website) or, 2) the contract is with an individual licensed under Title 26, Title 43, or the State Bar of Georgia who is in good standing and that individual is performing that service. Anyone your business subcontracts with for labor and services, as well as the subcontractors of your subcontractors, in furtherance of that contract is also subject to this requirement. E-Verify Contractor, Subcontractor, and Sub-Subcontractor affidavits can be found here.

E-Verify Private Employer Requirements

Georgia law, O.C.G.A. § 36-60-6, requires all businesses, with more than 10 employees that are seeking an occupation tax certificate/business license or other document required to operate a business with a county or city to sign an affidavit attesting that they are registered for and use E-Verify. Businesses with 10 or fewer employees are required to sign an affidavit attesting that they are exempt from this requirement. Once a business has provided this affidavit to the county, all subsequent renewals can be provided with the submission of the E-Verify number, as long as it is the same number as provided on the affidavit, or assertion that your business is exempt. The county will provide the format in which renewal information is collected. E-Verify Private Employer and Exemption Affidavits can be found here.

What Is E-Verify?

E-Verify is a federal Web-based system that electronically verifies the employment eligibility of newly hired employees. It works by allowing participating employers to electronically compare employee information taken from the I-9 Form (the paper-based employee eligibility verification form used for all new hires) against records in the Social Security Administration's database and the records in the Department of Homeland Security immigration databases.

Where Do I Find My E-Verify Number?

The Human Resources Department for your business should have that information, if you have registered. The E-Verify number, which consists of four to six numerical characters, is located directly below the E-Verify logo on the first page of the memorandum of understanding (MOU) entered into between your business and the Department of Homeland Security (DHS) to use E-Verify.

What if I cannot locate or do not have access to my MOU?

If the HR director/program administrator for E-Verify from your business has taken the E-Verify tutorial, you may obtain your company ID number by: 1) Logging in to E-Verify with your assigned user ID and password; 2) From 'My Company,' select 'Edit Company Profile;' 3) The Company Information page will display the company ID number. If your HR director/program administrator has not completed the tutorial, you must contact E-Verify Customer Support at 888-464-4218 or at E-Verify@dhs.gov for assistance.

Is the Federal Tax Identification Number/Employer Identification Number (EIN) the same as the E-Verify Number?

No. While you will be required to provide the Federal Tax Identification Number/EIN for your business to DHS in order to register for E-Verify, a separate number, which consists of four to six numerical characters, will be provided as the E-Verify number for your business by DHS, which will be located on the MOU.

How Do I Register for E-Verify? To register for E-Verify, please visit the [DHS website](http://www.dhs.gov/e-verify). If you need assistance in completing the registration process or need additional information relating to E-Verify, call their customer service number at 1-888-464-4218, email them at E-Verify@dhs.gov or visit their website at <http://www.dhs.gov/e-verify>.

GEORGIA SECURITY & IMMIGRATION COMPLIANCE (GSIC) AFFIDAVIT

The Oconee County Board of Commissioners and Contractor agree that compliance with the requirements of O.C.G.A. § 13-10-91, as amended, and Rule 300-10-1-.02 of the Rules of the Georgia Department of Labor are conditions of this Agreement for the physical performance of services.

The Contractor further agrees that its compliance with the requirements of O.C.G.A. § 13-10-91, as amended, and DOL Rule 300-10-1-.02 is attested to on the executed Contractor Affidavit and Agreement attached hereto.

If employing or contracting with any subcontractor(s) in connection with this Agreement, Contractor further agrees:

- 1) To secure from the subcontractor(s) an affidavit attesting to the subcontractor's compliance with O.C.G.A. § 13-10-91, as amended, and DOL Rule 300-10-1-.02; such affidavit being in the form attached hereto; and
- 2) The failure of Contractor to supply the affidavit of compliance at the time of execution of this Agreement and/or the failure of Contractor to continue to satisfy the obligations of O.C.G.A. § 13-10-91, as amended, and DOL Rule 300-10-1-.02 as set forth in this Agreement throughout the contract period shall constitute a material breach of the contract.

Upon notice of such breach, Contractor shall be entitled to cure the breach within ten days, upon providing satisfactory evidence of compliance with the terms of this Agreement and State law. Should the breach not be cured, Oconee County shall be entitled to all available remedies, including termination of the contract and damages.

SEE AFFIDAVITS ON FOLLOWING PAGE

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of the Oconee County Board of Commissioners has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Name of Project

Oconee County Board of Commissioners

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:

Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with

_____ (Name of Contractor) on behalf of the Oconee County Board of Commissioners has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontractor has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, a copy of the notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Subcontractor

Name of Project

Oconee County Board of Commissioners

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:



RFP#FY1609-01
Bogart Sports Complex Trail Renovation
SUBCONTRACTORS

Please list any subcontractors that you will be working with during the course of this contract:

SUBCONTRACTOR ONE

Company Name: _____

Address: _____

Contact Person and Title: _____

Phone/Email: _____

Scope of Work: _____

SUBCONTRACTOR TWO

Name: _____

Address: _____

Contact Person and Title: _____

Phone/Email: _____

Scope of Work: _____

SUBCONTRACTOR THREE

Company Name: _____

Address: _____

Contact Person and Title: _____

Phone/Email: _____

Scope of Work: _____

THIS FORM MUST BE RETURNED WITH YOUR PROPOSAL.