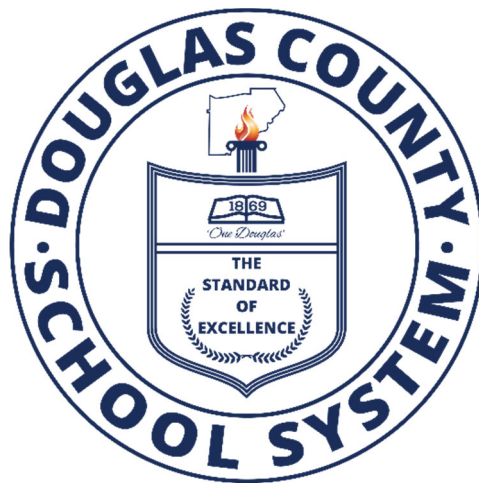


How to Do Business with The Douglas County School System (DCSS)

Vendors' Guide 2023-2024



Douglas County School System PROCUREMENT DEPARTMENT

Dear Vendor:

Thank you for your interest in doing business with the Douglas County School System. The intent of this handbook is to allow all interested vendors the opportunity to understand how the Procurement Department operates for the Douglas County School System.

It is the responsibility of the Douglas County School System Procurement Department to solicit items and purchase supplies/services for our students and staff at fair and reasonable costs which are within the guidelines established by the Douglas County Board of Education, the State of Georgia, and all applicable Federal regulations.

The Douglas County School System's Procurement Department encourages and practices full and open competition. All vendors are welcomed and encouraged to bid on all available solicitations. We look forward to doing business with your organization. If you need any further information that is not included in this manual, please contact the Procurement Department at 770-651-2000.

Sincerely,

Becky Eigel

Becky Eigel
Assistant Director of Business Services

Mission

We will SERVE our community with excellence by...

- **Helping our students reach their potential as we prepare them for college and career in a safe and supportive environment**
- **Recruiting, cultivating and retaining the best teachers, staff and administrators**
- **Providing a challenging curriculum and relevant learning opportunities**
- **Providing the highest quality instructional resources and tools**
- **Fostering a culture of continuous improvement**

Vision

Our VISION is to build a community of lifelong learners who become responsible individuals, independent thinkers and productive citizens in a global society.



DOUGLAS COUNTY SCHOOL SYSTEM

11490 Veterans Memorial Hwy., Douglasville, GA 30134

770.651.2000 | DCSSGA.org

The Standard of Excellence

Beliefs

We BELIEVE that we must...

- Understand how children and adults learn and continue learning
- Build communities of lifelong learners
- Cultivate the leadership potential of every employee, student and parent in our school system
- Be creative, energetic visionaries who respond quickly to diverse and evolving issues
- Meet the diverse needs of all stakeholders (students, parents, employees and community)
- Maintain efficient and effective administrative processes for instruction, operations, human resources and sound fiscal management

Douglas County School System

FACTS

- We have 33 Schools in Douglas County
 - 20 Elementary Schools
 - 8 Middle Schools
 - 5 High Schools
- We have 4 Specialized Learning Facilities in Douglas County
 - College and Career Institute (CCI)
 - Student Success Center/Performance Learning Center (SSC)
 - Haven Academy
 - FLEX Academy
- We have one Charter School in Douglas County
 - Brighten Academy
- There are approximately 21,500 students currently enrolled in the school system.

TYPES OF ITEMS PURCHASED

- Books
- Office and Classroom Supplies
- Instructional Supplies
- Technology/Electronics
- Software Programs
- Furniture
- Vehicles
- Maintenance Supplies/Equipment
- Custodial Supplies/Equipment

Douglas County School System PROCUREMENT POLICIES

All purchases over \$5,000 must go through a bidding process.

The bidding requirements for the Douglas County School System are as follows:

- Purchases for goods and services with a total estimated value of less than \$5,000 shall be made with effort to provide the least expense to the Board. Purchases shall be based on one or more oral quotations, when possible, to determine the best price.
- All purchases for goods and services with a total estimated value of at least \$5,000, but less than \$10,000, shall be made on the basis of at least three verbal quotes.
- All purchases for goods and services with a total estimated value of at least \$10,000, but less than \$50,000, shall be made on the basis of at least three written quotes.
- All purchases for goods and services of \$50,000 or more shall be awarded after public advertisement for bid by electronic means on an Internet website of the Douglas County School System. These shall be awarded through a written competitive sealed bid process and with the approval of the Superintendent, Chief Financial Officer, and, if not previously included in the approved Douglas County School System budget, the Douglas County Board of Education. All bids of this nature must be handled by the Procurement Department.

PROCUREMENT DEFINITIONS

RFQ (Request for Quote) or ITB (Invitation to Bid)

- Bid package contains specifications and award will be made to the lowest, most responsive bidder.

RFP (Request for Proposal)

- Proposal package contains some general specifications. Vendor is required to provide a solution to meet all DCSS needs. Award is based on factors such as cost, quality, scheduling, firm history, references and any other factors relevant to the product or service needed.

Douglas County School System PLACEMENT ON VENDORS' LIST

1. All companies must be registered in order to do business with the Douglas County School System. Vendors may register online, or if unable to do so, hard copies of the Vendor Information Forms can be completed and sent to the Business Services/Procurement office. Registered companies will be considered Self Service Vendors until the vendor actually wins an award or a DCSS school/department requests that a particular vendor be activated.

2. Vendor Registration – Munis Vendor Self Service (*preferred method*):

For Munis Vendor Self Service Registration, please visit:

<https://dcssvendors.munisselfservice.com/Vendors/default.aspx>

3. Vendor Registration – Bonfire:

The Douglas County School System has partnered with Bonfire Interactive, an online procurement software, to allow vendors to receive notifications of solicitations and submit bids and proposals to the Douglas County School System digitally. The Bonfire platform will also help the DCSS maintain vendor information and provide better communication with vendors.

For Bonfire Registration, please visit:

<https://dcssga.bonfirehub.com/>

4. Vendors are required to include their W-9, E-Verify Documents and, if applicable, Insurance Certificates at the time of registration. Vendors should also choose all appropriate Commodity Codes associated with the goods/services they provide.
5. Once Vendors have registered and have provided a valid email address and applicable Commodity Codes, Vendors will begin receiving email notifications of bid opportunities. Vendors may then visit our Procurement webpage to download bid packages.
6. Due to the implementation of the Vendor Self Service system (VSS), the Douglas County School System will no longer maintain a separate list of companies who have submitted to us their completed Vendor Information Forms, along with, literature about the goods/services they provide. All current and prospective Vendors should

register their Vendor profiles online. Vendors are encouraged to attach literature and product information about their goods/services to their Vendor profile in the VSS. Should we have a need to locate a company who provides a particular good or service, we will use the VSS as a reference. Please remember to assign the appropriate commodity codes to your Vendor profile so that our Vendor searches will be effective.

7. Bid solicitations are posted to the Douglas County School System website and the DCSS Bonfire portal. Vendors should review our website frequently for current bid opportunities and for checking on any Addendums to outstanding bids.

- www.dcssga.org
- *Departments > Procurement > Current Solicitations*
- *Double click on "Current Bids" for all bid opportunities*

8. The following documents are required before a Vendor is considered for placement in the Vendor database:

- **W-9 form**, completed
- **GA Security and Immigration Compliance Act Form**
Note: At least one of the Immigration Compliance Affidavits listed below must be included in your Vendor Registration
 - **Contractor Affidavit and Agreement** (Notarized) – *if applicable*
 - **Sub-Contractor Affidavit and Agreement** (Notarized) – *if applicable*
 - **Affidavit of No Employees** , and copy of Driver's License (Notarized) – *if applicable*
- **Consultant Agreement**, if you are doing consulting work and will be paid from County Budgeted funds
- **Consultant Agreement – Federal Funds**, if you are doing consulting work and will be paid from Federal Budgeted funds
- **Self-Employment Agreement**, if you are doing work and will be paid from Local School funds
- **Insurance Requirements** – Copy of Insurance Certificates are required if Vendor will be on DCSS property performing physical work.
- **Completed Background Check**, if Individual/company will be working directly with students.

Douglas County School System

ILLEGAL IMMIGRATION REFORM & ENFORCEMENT ACT

The **Illegal Immigration Reform and Enforcement Act of 2011** (House Bill 87) requires the Douglas County School System to have contractors, subcontractors and sub-subcontractors who provide "physical performance of services" to complete the appropriate forms that meet the defined criteria.

"Physical performance of services means any performance of labor or services for a public employer using a bidding process or by contract wherein the labor or services exceed \$2,499.99; provided, however, that such term shall not include any contract between a public employer and an individual who is licensed pursuant to Title 26 or Title 43 or by the State Bar of Georgia and is in good standing when such contract is for services to be rendered by such individual."

Source: O.C.G.A. 13-10-90 & 13-10-91

The following websites may provide helpful information regarding House Bill 87:

1. Georgia Department of Audits

<https://www.audits2.ga.gov/resources/other/immigration/>

2. E-Verify Registration Website (*Follow this link to obtain your EEV User ID Number*)

<http://www.uscis.gov/e-verify>

PAYMENTS

- Unless prior arrangements have been made, all orders must be received in full before a Purchase Order is paid. No partial payments are made on purchase orders.
- DCSS payment terms are Net 30 days from the date of delivery or invoice, whichever is later.

Douglas County School System CONTACT INFORMATION

Business Services Office

Becky Eigel, Assistant Director of Business Services

11490 Veterans Memorial Hwy

Douglasville, GA 30134

770.651.2376

770.920.4026 Fax

Becky.Eigel@dcssga.org

www.dcssga.org

For Vendor Inquiries and Activations, please contact:

Darlene Snyder

Finance Department

Darlene.Snyder@dcssga.org

770.651.2092

Douglas County School System

APPENDIX

- *Vendor Instructions*
- *Vendor Information Forms*
- *W-9*
- *E-Verify Forms*
- *Consultant Agreement*
 - *General Funds*
 - *Federal Funds*
- *Self-Employment Agreement*
(Local Funds Only)
- *Insurance Requirements*

Instructions for Information/Forms Required from Douglas County School System Vendors

Vendor Information Registration: Online registration must be completed by all new vendors. There are two ways to register online.

1. **Munis Vendor Self Service** (<https://dcssvendors.munisselfservice.com>). Vendor Self Service (VSS) must be completed by all new vendors or any vendor whose information needs to be updated (address changes, additional addresses, contact changes, etc.). All Vendors, regardless of funding source (budgeted or local), should register with VSS. Once Vendors are registered, School System Munis users will be able to locate the Vendor information by conducting a “Vendor Inquiry” in Munis.
2. **Bonfire** (<https://dcssga.bonfirehub.com/>). The Douglas County School System has partnered with Bonfire Interactive, an online procurement software, to allow vendors to receive notifications of solicitations and submit bids and proposals to the Douglas County School System digitally. The Bonfire platform will also help the DCSS maintain vendor information and provide better communication with vendors.
3. **Vendor Information Forms.** If companies are unable to complete the online registrations, a hard copy of the Vendor Information Forms can be printed, completed and returned to the DCSS Business Services/Procurement Department for entry into the Vendor database. Copies of the forms can be located in the Appendix.

Form W-9 Request for Taxpayer Identification Number and Certification must be completed by all new vendors. Download form at www.irs.gov/pub/irs-pdf/fw9.pdf

If the vendor (supplier) will be paid more than \$2,499.00 (per contract), the Georgia Security and Immigration Compliance Act form must be completed. In addition to this form, the Contractor Affidavit and Agreement, Subcontractor Affidavit, Affidavit of No Employees may need to be completed. Refer to the instructions below to determine the additional form(s) the vendor (supplier) needs to complete.

E-Verify Documents (4 pages) - These forms must be completed no matter which type of funds will be used for the payment (County, Local, Booster club, PTA, PTSO, etc.) These forms are to be attached to the Vendor Information File in VSS.

Georgia Security and Immigration Compliance Act (1 page document) must be completed by all new vendors.

1. At Item # 2, the vendor should initial a, b or c (whichever statement is applicable to them). *All three statements should not be initialed.*
 - a. If vendor (supplier) initials letter (a), the **Contractor Affidavit and Agreement** must be completed. The vendor’s (supplier’s) E-Verify number must be listed at the “EEV/Basic Pilot Program User Identification Number” line on the Contractor Affidavit and Agreement.
 - b. If the vendor (supplier) initials letter (b), the **Affidavit of No Employees** must be completed and a copy of the vendor’s driver’s license must be included.
 - c. If the vendor (supplier) initials letter (c), no other forms are required.
2. Item # 3 should be initialed stating that the vendor will only hire subcontractors that are registered with the E-Verify system.
3. If the vendor (supplier) initials Item # 4, they must secure a **Subcontractor Affidavit** from each subcontractor they hire.
4. Item # 5 should be initialed by the vendor (supplier) if they hire subcontractors. When initialing this item, the vendor (supplier) is stating that within 5 days they will provide DCSS with all Subcontractor Affidavits for any subcontractors they hire for a particular contract.
5. Item # 6 should be initialed by any vendor (supplier) that is considered a “foreign company”. If this item is initialed, none of the other items should be initialed.

Consultant Agreement must be completed for a vendor each time they provide a service for the school system and they are being paid from either County Budgeted funds or Federal funds. (*If using local school funds, use a Self-Employment Agreement.*) Download form at www.dcssga.org > Departments > Procurement > Purchasing Forms > Procurement Forms > Consultant Agreement

Self-Employment Agreement must be completed for a vendor each time they provide a service for the school system and they are being paid from Local School Funds. (*If using county budgeted funds, use a Consultant Agreement.*) Download form at www.dcssga.org > Departments > Business and Financial > School Accounting > Miscellaneous School Accounting > Self Employment Agreement

Insurance Certificate – If the vendor is performing a *construction related service* (payment from county, local, booster club, PTS, PTSO, etc.), the vendor’s insurance company must provide an Insurance Certificate to DCSS showing that the vendor has the required amounts of Commercial General Liability Insurance, Business Automobile Insurance and Worker’s Compensation Insurance. Refer to the Insurance Requirements page in the “How to Do Business with the Douglas County School System (DCSS) package posted at www.dcssga.org > Departments > Procurement > Vendor Information > Purchasing Forms > Vendor Forms > How to Do Business Vendor Handbook.

DOUGLAS COUNTY SCHOOL SYSTEM

BUSINESS SERVICES OFFICE
P.O. BOX 1077, DOUGLASVILLE, GA 30133
770-651-2000 FAX 770-920-4026

In order to conduct business with and/or receive payments from the Douglas County School System, the following information is required. Failure to provide this information may result in delayed payments.

VENDOR # _____

To Be Completed by Douglas County School System

VENDOR INFORMATION FORM

SCHOOL/DEPARTMENT REQUESTING VENDOR BE ADDED

DCSS Employee #
(if applicable)

Employee's Location

Company or Business Name: _____

(Refer to instructions on the bottom of page.)

Individual Name: _____

Federal ID or Social Security Number: _____

AND DUNS # _____

(Please use 9 digit standard format: FEIN XX-XXXXXXX or SSN XXX-XX-XXXX)

PURCHASE ORDER MAILING ADDRESS and CONTACT INFORMATION:

Street address: _____

include building/suite number

City: _____

State: _____

Zip Code: _____

Phone: _____

Fax: _____

Web Site: _____

Contact Name: _____

(Local Representative in Atlanta Area)

E-Mail Address: _____

Cell Phone: _____

Contact Name: _____

(Someone we may contact if we cannot reach the local representative.)

E-Mail Address: _____

Cell Phone: _____

Account/Contract #:

Discount

Shipping Terms

REMITTANCE ADDRESS and CONTACT INFORMATION (if different from address listed above)

Street address: _____

include building/suite number

City: _____

State: _____

Zip Code: _____

Phone: _____

Fax: _____

Contact: _____

Doing Business As: Corporation LLC Sole Proprietorship Partnership Individual

Educational Governmental US Citizen/Resident Non-Resident Alien Other

INSTRUCTIONS

• *Sole Proprietors* : Must enter your individual name (as shown on your social security card) on the Individual Name line.

You may enter your business or "doing business as" name on the Business Name line. For the Taxpayer Identification Number, enter either your Social Security Number or the Federal Employer Identification Number of the business.

• *Business Name* : Enter the name of the entity as it is listed with the IRS on the Form SS-R, Application for Employer Identification Number. This name should be consistent with the name used on tax returns.

**DOUGLAS COUNTY SCHOOL SYSTEM
VENDOR INFORMATION FORM**

VENDOR _____

How long have you been in business? _____

Do you currently do business with Douglas County School System? _____

In what capacity? _____

List other school systems you currently service _____

CONFLICT OF INTEREST POLICY

Does any Officer, Director, Owner or Partner in this company have a relationship with the Douglas County School System?

YES NO

- The types of relationships include:
1. A spouse/partner or minor child is employed by the Douglas County School System.
 2. A financial relationship with a Douglas County School System employee.
 3. A personal relationship with a Douglas County School System employee.

If yes, please state the NAME and RELATIONSHIP to individual:

Does any Officer, Director, Owner or Partner in this company hold a position at any Douglas County School System department or school?

YES NO

If yes, please state the NAME and RELATIONSHIP to individual:

GEORGIA IMMIGRATION REFORM AND CONTROL ACT

***** In order to insure compliance with the Immigration Reform and Control Act of 1986 (IRCA), D.L. 99-603 and the Georgia Security and Immigration Compliance Act, as amended by the Illegal Immigration Reform Act of 2011, OCGA 13-10-90 et. seq., (collectively the "Act") the Vendor ("Contractor") MUST INITIAL the statement applicable to Contractor below; and Contractor must immediately notify DCSS in writing if the affirmations below change:

(a) _____ (Initial here): Contractor warrants that, Contractor has registered at <https://e-verify.uscis.gov/enroll/> to verify information of all new employees in order to comply with the Act; is authorized to use and uses the federal authorization program; will continue to use the authorization program throughout the contract period; Contractor further warrants and agrees Contractor shall execute and return any and all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-1-.01 et.seq.; **[Contractors who initial (a) must attach a Contractor Affidavit and Agreement]**;

OR

(b) _____ (Initial here) Contractor represents and warrants that it does not physically perform any service within the State of Georgia pursuant to O.C.G.A. 13-10-90 et al. and thus does not have to comply with the foregoing Georgia law.

VENDOR APPLICATION VERIFICATION

The undersigned certifies that the information contained herein is correct. I understand that misrepresentation may be cause for removal from the qualified vendor list and any other penalties allowed by law. Further, I affirm that this company's employment practices do not discriminate because of age, race, creed, color, sex, national origin, religion, or disability.

I also understand that the Douglas County School System is on a Net 30 day payment schedule and that payment will not be made until 30 days after the date of invoice and/or receipt or completion of goods and services.

VENDOR SIGNATURE (Typing your name certifies information is correct.)

TITLE

PHONE

DATE

DCSS OFFICE USE ONLY	CONFLICT OF INTEREST	VERIFIED LICENSED IN STATE OF GEORGIA	VERIFIED NOT LISTED ON EPLS LIST	VERIFIED WORKER'S COMP INSURANCE	GA IMMIGRATION REFORM ACT
<i>(Form Revised 7/16/2014)</i>	DATE ENTRY APPROVED	DATE ENTERED INTO MUNIS	DATE DENIED	DATE REQUESTOR NOTIFIED	

**DOUGLAS COUNTY SCHOOL SYSTEM
COMMODITY CODE LIST**

Vendor Name:			
CODE	AUDIO/VISUAL	CODE	EDUCATION AND INSTRUCTION
803	Sound Systems & Accessories	23355	Kilns and Furnaces
840	Television Equipment	493	Laboatory Equipment, Chemistry
84027	Television Equip-Carts/Stand	495	Laboatory Equipment, Biology
84030	Television Equip-DVD/TV Combos	580	Musical Instruments
84067	Television Equip-Video Camera Recorders	71505	Publications and AV-Audio Cassettes
84068	Television Equip-VCR/DVD/TV Combos	71510	Publications and AV-Books
880	Visual Education Equipment	71512	Publications and AV-Reference
88043	Visual Education Equip-Projection Screens	71535	Publications and AV-Electronic
	Other Audio/Visual	71590	Publications and AV-Video Cassettes
CODE	AUTOMOTIVE	785	School Equipment and Supplies
055	Automotive Accessories	78515	School Equipment-Dry Erase Boards
060	Automotive Maintenance Items	78589	School Equipment-Special Education
065	Automotive Bodies, Accessories	78590	School Equipment-Test & Test Scoring Devices
070	Automotive Vehicles		Other Education and Instruction
075	Automotive Shop Equipment	CODE	FOOD/NUTRITION
405	Fuel, Oil, Grease & Lubricants	019	Agricultural Crops and Grains
863	Tires and Tubes	090	Bakery Equipment, Commercial
	Other Automotive Miscellaneous	165	Cafeteria Equipment, Commerical
CODE	COMMUNICATIONS	240	Cutlery, Dishes, Flatware, Glassware, Etc.
725	Radio Communication, Telephone	245	Dairy Equipment and Supplies
72574	Radio Communication, Two-Way Radio	370	Food Processing Equipment and Supplies
	Other Communications	375	Foods, Bakery Products (Fresh)
CODE	CONSTRUCTION	380	Foods, Dairy Products (Fresh)
135	Bricks and Other Clay Products	385	Foods, Frozen
150	Builder's Supplies	390	Foods, Perishable
155	Buildings and Structures	393	Food, Staple Grocery
210	Concrete and Metal Culverts	740	Refrigeration Equipment and Accessories
	Other Construction		Other Food/Nutrition
CODE	CUSTODIAL	CODE	FURNITURE
085	Bags, Bagging, Ties, Erosion Control Equip.	420	Furniture - Cafeteria, Library, School
365	Floor Maintenance Machines	425	Funiture - Office
485	Janitorial Supplies, General	42553	Lockers, Storage
48550	Door Mats, All Types		Other Furniture
640	Paper and Plastic Products Disposable	CODE	LIBRARY
	Other Custodial	125	Bookbinding Supplies
CODE	EDUCATION & INSTRUCTION	525	Library and Archival Equipment
050	Art Equipment and Supplies		Other Library
232	Crafts, General		

	CODE	MAINTENANCE		CODE	SERVICES
	010	Acoustical Tile, Insulating Materials, Supplies		906	Architectural Services, Professional
	025	Air Compressors & Accessories		907	Architectural Services, Non-Professional
	031	Air Conditioning & Heating Supplies		909	Building Construction Services, New
	28550	Light Bulbs		910	Building Maintenance and Repair Services
	295	Elevators and Escalators		91039	Janitorial/Custodial Services
	330	Fencing		912	Construction Services, General
	335	Fertilizers & Soil Conditioners		915	Communication and Media Services
	340	Fire Protection Equipment		918	Consulting Services
	360	Floor Covering		91838	Consulting Services-Education and Training
	445	Hand Tools, Accessories & Supplies		91843	Consulting Services-Environmental
	450	Hardware and Related Items		924	Educational Services
	515	Lawn Maintenance Equipment		925	Engineering Services, Professional
	540	Lumber and Related Products		926	Environmental Services
	57M	General Maintenance		946	Financial Services
	59595	Wood Chips and Bark, Composted		953	Insurance, All Types
	630	Paint and Related Products		956	Library Services
	635	Painting Equipment and Accessories		96115	Vending, Concessions, Catering Services
	66M	Locks and Doors		966	Printing and Related Services
	670	Plumbing Equipment and Supplies		96896	Water & Wastewater Treatment Services
	770	Roofing		971	Real Property Rental or Lease Services
	801	Signs, Sign Materials		981	General Equipment Rental or Lease Services
	885	Water and Wastewater Chemicals		985	Office Equipment Rental or Lease Services
	895	Welding Equipment & Supplies		98854	Lighting Services for Athletic Fields
		Other Maintenance		989	Sampling and Testing Services
					Other Services
	CODE	OFFICE		CODE	TECHNOLOGY
	310	Envelopes, Plain or Printed		204	Computer Hardware-Microcomputer
	395	Forms, Computer		206	Computer Hardware-Mainframe
	600	Office Machines, Equipment & Accessories		207	Computer Accessories and Supplies
	60082	Shredders, Paper		208	Computer Software-Microcomputers
	615	Office Supplies, General		209	Computer Software-Mainframe
	620	Office Supplies, Pens, Pencils, Etc.		287	Electronic Components & Replacement Parts
	645	Paper			Other Technology
		Other Office			
	CODE	SAFETY AND ATHLETICS			OTHER CATEGORIES NOT CLASSIFIED ABOVE
	200	Clothing, Athletic Uniforms			
	345	First Aid and Safety Equipment			
	420004	Auditorium/Stadium Seating			
	650	Playground Equipment			
	805	Sporting Goods, Athletics			
	860	Tickets, Coupon and Sale Books			
		Other Safety and Athletics			

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.

Print or type.	See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p>2 Business name/disregarded entity name, if different from above</p> <hr/> <p>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.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>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.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
		<p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p>6 City, state, and ZIP code</p> <hr/> <p>7 List account number(s) here (optional)</p> <hr/>	<p>Requester's name and address (optional)</p> <hr/>

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											
				-			-				
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.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

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 Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

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

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

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

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

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% 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 instructions for Part II 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*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

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*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

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

Penalties

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

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

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

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

Specific Instructions

Line 1

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

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

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

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

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or “doing business as” (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity’s name as shown on the entity’s tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a “disregarded entity.” See Regulations section 301.7701-2(c)(2)(iii). Enter the owner’s name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner’s name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on line 2, “Business name/disregarded entity name.” If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

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

Line 3

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

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

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

Exempt payee code.

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

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

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

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

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 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 reportable under section 6045(f), and payments for services paid by a federal executive agency.

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

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 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 664 or described in section 4947(a)(1)

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

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

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

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

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, 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 *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at 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. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

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 item 1, 4, or 5 below indicates otherwise.

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

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

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.

You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.

You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions.

You must sign the certification. You may cross out item 2 of the certification.

4. Other payments.

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

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), 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) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. 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
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations 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*, earlier.

*Note: The grantor also must provide a Form W-9 to trustee of trust.

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

Secure Your Tax Records From Identity Theft

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

To reduce your risk:

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

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

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

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

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

Protect yourself from suspicious emails or phishing schemes.

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

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

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

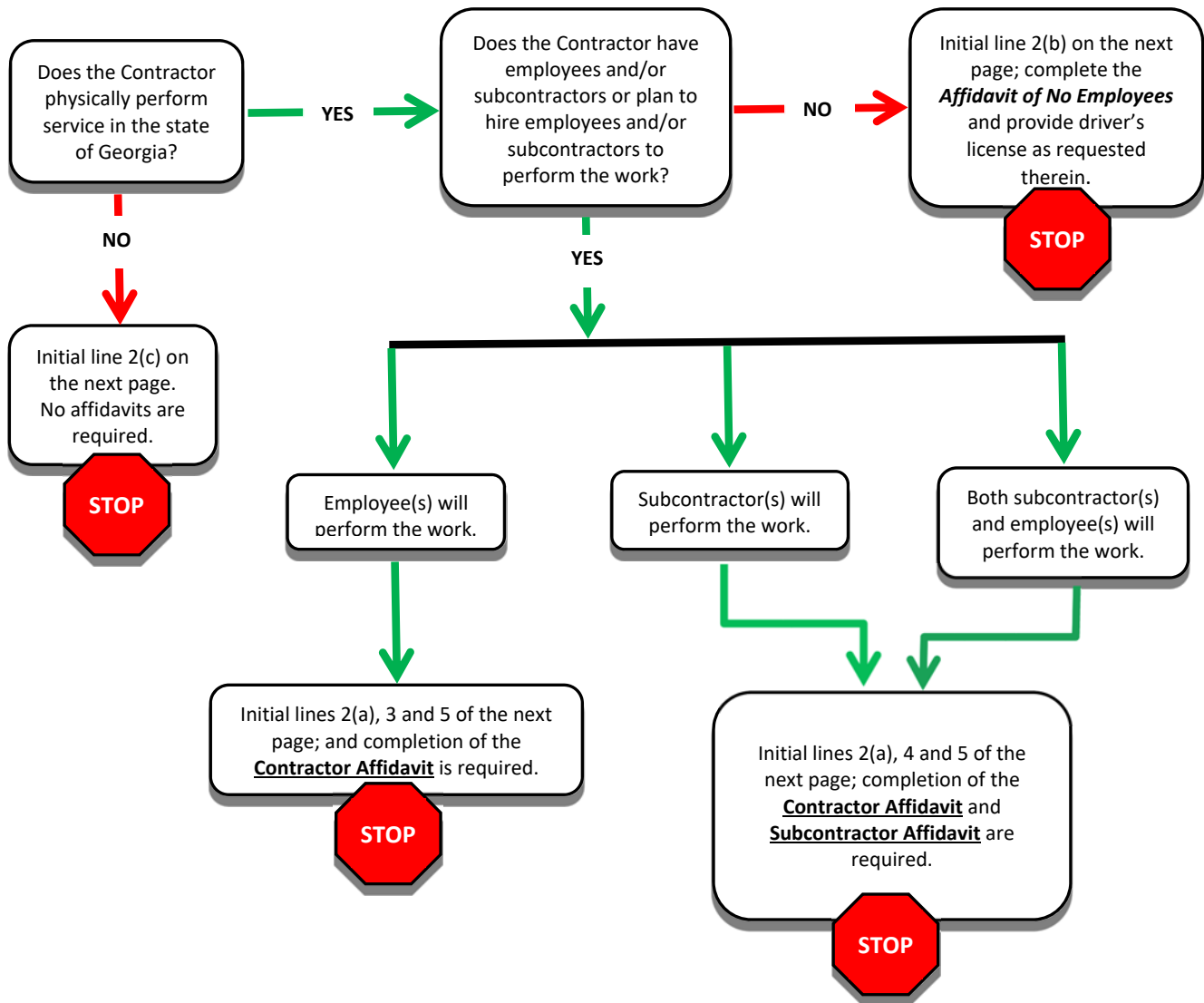
Privacy Act Notice

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.

DOUGLAS COUNTY SCHOOL DISTRICT
BUSINESS SERVICES / PROCUREMENT DEPARTMENT

GEORGIA SECURITY & IMMIGRATION COMPLIANCE ACT DOCUMENTS

Please follow the chart below to assist with completing the E-Verify documents as required by the Georgia Security and Immigration Compliance Act, O.C.G.A. § 13-10-90 et seq. If in doubt as to whether a document should be completed and submitted, it is recommended that the Vendor submit the information.



DOUGLAS COUNTY SCHOOL SYSTEM

DOUGLASVILLE, GEORGIA
BUSINESS SERVICES OFFICE

E-VERIFY DOCUMENTS (Page 1 of 4)

**GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT, AS AMENDED BY THE
ILLEGAL IMMIGRATION REFORM ACT OF 2011, O.C.G.A. 13-10-90, ET AL.**

TO ALL PROSPECTIVE SUPPLIERS:

If you are providing services to the Douglas County School System, the applicable Georgia Security and Immigration Compliance documents found here must be completed, signed, notarized and submitted with your quote/bid/proposal.

- 1) The Douglas County School System shall comply with the Georgia Security and Immigration Compliance Act, as amended, Act O.C.G.A. 13-10-90 et. seq.,
- 2) In order to insure compliance with the Immigration Reform and Control Act of 1986 (IRCA), D.L. 99-603 and the Georgia Security and Immigration Compliance Act, as amended by the Illegal Immigration Reform Act of 2011, O.C.G.A. 13-10-90 et. seq., (collectively the "Act") the Supplier ("Supplier") **MUST INITIAL** the statement applicable to Supplier below:
 - (a) _____ **(Initial here)** Supplier warrants that, Supplier has registered at <https://e-verify.uscis.gov/enroll/> to verify information of all new employees in order to comply with the Act; is authorized to use and uses the federal authorization program; will continue to use the authorization program throughout the contract period; Supplier further warrants and agrees Supplier shall execute and return any and all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-1-.01 et.seq; OR
 - (b) _____ **(Initial here)** Supplier represents and warrants that it has no employees and does not intend to hire employees to perform contractual services and thus has provided a U.S. state-issued driver's license or ID card in lieu of an affidavit if, which license or ID card was issued by a State that verifies lawful immigration status before issuing the license of ID card. If my status changes I will, before hiring any employees, immediately notify the System in writing and provide all affidavits required. (Complete the Affidavit of No Employees); OR
 - (c) _____ **(Initial here)** Supplier represents and warrants that it does not physically perform any service within the State of Georgia pursuant to O.C.G.A. 13-10-90 et al. and thus does not have to comply with the foregoing Georgia law.
- 3) _____ **(Initial here)** Supplier will not employ or contract with any subcontractor in connection with a covered contract unless the subcontractor is registered, authorized to use, and uses the federal work authorization program; and provides Supplier with all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-1-.01 et.seq.
- 4) _____ **(Initial here)** Supplier agrees that, if Supplier employs or contracts with any subcontractor in connection with the covered contract under the Act and DOL Rule 300-10-1-.02, that Supplier will secure from each subcontractor at the time of the contract the subcontractor's name and address, the employee-number applicable to the subcontractor, the date the authorization to use the federal work authorization program was granted to subcontractor; the subcontractor's attestation of the subcontractor's compliance with the Act and Georgia Department of Labor Rule 300-10-1-.2.; and the subcontractor's agreement not to contract with subcontractors unless the subcontractor is registered, authorized to use, and uses the federal work authorization program; and provides subcontractor with all affidavits required by the Act and the rules and regulations issued by the Georgia Department of Labor as set forth at Rule 300-10-1-.01 et. seq.
- 5) _____ **(Initial here)** Supplier agrees to provide the Douglas County School System with all affidavits of compliance as required by O.C.G.A. § 13-10-90 *et seq.* and Georgia Department of Labor Rule 300-10-1-.02, 300-10-1-.03, 300-10-1-.07 and 300-10-1-.08 within five (5) business days of receipt.
- 6) _____ **(Initial here)** Supplier is a foreign company and therefore not required to provide the affidavit as required by O.C.G.A. § 13-10-90 *et seq.* Supplier must comply with any other laws required to perform services in the United States, including but not limited to having an appropriate visa.

Company Name / Supplier Name

Title of Authorized Officer or Agent of Supplier

Date

DOUGLAS COUNTY SCHOOL SYSTEM

DOUGLASVILLE, GEORGIA
BUSINESS SERVICES OFFICE

E-VERIFY DOCUMENTS (Page 2 of 4)

CONTRACTOR AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned Respondent verifies its compliance with O.C.G.A. 13-10-91, and attests under oath that:

- (1) The individual, firm, or corporation ("Supplier") which is contracting with the Douglas County School System has registered with, is authorized to use, uses, and will continue throughout the contract term to use and participate in, a federal work authorization program [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91, as amended. As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).
- (2) Supplier's correct user identification number and date of authorization is set forth herein below.
- (3) Supplier agrees that the Supplier will not employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the Douglas County School System, unless at the time of the contract said subcontractor:
 - (a) is registered with and participates in the federal work authorization program;
 - (b) provides Supplier with a duly executed, notarized affidavit with the same affirmations, agreements, and information as contained herein and in such form as required under applicable law; and
 - (c) agrees to provide Supplier with notice of receipt and a copy of every subcontractor Affidavit or other applicable verification procured by subcontractor at the time of contract with the subcontractor(s) within five (5) business days after receiving the said Affidavit or verification.

Supplier agrees to maintain records of such compliance and to provide notice of receipt and a copy of each such subcontractor Affidavit or other permissible verification to the Douglas County School System at the time the subcontractor(s) is retained to perform such service or within five (5) days after receiving the said Affidavit or verification, whichever first occurs.
- (4) Supplier further agrees to and shall provide Douglas County School System with copies of all other affidavits or other applicable verification received by Supplier (i.e.: subcontractor affidavits and all other lower tiered affidavits) within five (5) days of receipt.

(E-VERIFY NUMBER) EEV/Basic Pilot Program User Identification Number

Date of Authorization

If an applicable Federal work authorization program as described above is used, other than the EEV/Basic Pilot Program, please identify the program.

Company Name / Supplier Name

BY: _____
Signature of Authorized Officer or Agent

Date

Title of Authorized Officer or Agent of Supplier

Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20_____

Notary Public

My Commission Expires

DOUGLAS COUNTY SCHOOL SYSTEM

DOUGLASVILLE, GEORGIA
BUSINESS SERVICES OFFICE

E-VERIFY DOCUMENTS (Page 3 of 4)

SUBCONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. 13-10-91, and attests under oath that:

- (1) The undersigned individual, firm or corporation ("Subcontractor") is engaged in the physical performance of services under a contract with _____ (name of Respondent), which has a contract with the Douglas County School System.
- (2) Subcontractor has registered with, is authorized to use, uses, and will continue throughout the contract term to use and participate in, a federal work authorization program [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91. As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).
- (3) Subcontractor's correct user identification number and date of authorization is set forth herein below.
- (4) Subcontractor agrees that the Subcontractor will not employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this subcontract or the contract with the Douglas County School System, unless said subcontractor:
 - (a) is registered with and participates in the federal work authorization program;
 - (b) provides Subcontractor with a duly executed, notarized affidavit with the same affirmations, agreements, and information as contained herein and in such form as required under applicable law; and
 - (c) agrees to provide Subcontractor with notice of receipt and a copy of every subcontractor Affidavit or other permissible verification procured by subcontractor at the time the subcontractor(s) is retained to perform such service or within five (5) days after receiving the said Affidavit or verification, whichever first occurs.

Subcontractor agrees to maintain records of such compliance and to provide notice of receipt and a copy of each such subcontractor Affidavit or other applicable verification to the Supplier at the time the subcontractor(s) is retained to perform such service or within five (5) days after receiving the said Affidavit or verification, whichever first occurs.

(E-VERIFY NUMBER) EEV/Basic Pilot Program User Identification Number

Date of Authorization

If an applicable Federal work authorization program as described above is used, other than the EEV/Basic Pilot Program, please identify the program.

Company Name / Sub-contractor Name

BY: Signature of Authorized Officer or Agent (of Subcontractor)

Date

Title of Authorized Officer or Agent of Subcontractor

Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20____

Notary Public

My Commission Expires

DOUGLAS COUNTY SCHOOL SYSTEM

DOUGLASVILLE, GEORGIA
BUSINESS SERVICES OFFICE

E-VERIFY DOCUMENTS (Page 4 of 4)

AFFIDAVIT OF NO EMPLOYEES

The undersigned, in connection with a proposed contract or subcontract with the Douglas County School System for the physical performance of service in the State of Georgia (the "Contract"), hereby affirms and certifies under penalties of perjury that:

- (a) I am a sole proprietor.
- (b) I do not employ any other persons.
- (c) I do not intend to hire any employees to perform the Contract.
- (d) A true, correct and complete copy of my driver's license is attached hereto.
- (e) If at any time hereafter I determine that I will need to hire employees to satisfy or complete the physical performance of services under the Contract then before hiring any employees, I will:
 - (i.) immediately notify the School System in writing; and
 - (ii.) register with, participate in and use, a federal work authorization program operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91, as amended; and
 - (iii.) Provide the School System with all affidavits required by O.C.G.A. § 13-10-90 *et seq.* and Georgia Department of Labor Rule 300-10-1-.02, 300-10-1-.03, 300-10-1-.07 and 300-10-1-.08.

Print Company Name / Name of Sole Proprietor

BY: Signature of Authorized Officer/Agent

Date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20 _____

Notary Public

My Commission Expires

[Attach copy of driver's license]

Will Consultant be working
in the school with Students?
_____ Yes _____ No

Requisition # _____
Facility # _____
Purchase Order # _____

DOUGLAS COUNTY SCHOOL SYSTEM AGREEMENT FOR CONSULTANT

SCHOOL SYSTEM: DOUGLAS COUNTY SCHOOL SYSTEM SCHOOL: _____
P.O. BOX 1077
DOUGLASVILLE, GA 30133 BUDGET: _____

CONSULTANT/INSTRUCTOR: _____
ADDRESS: _____

PHONE: _____ EMAIL: _____

FEDERAL ID OR LAST 4 OF SS #: _____

TITLE OF ACTIVITY: _____

DATE(S): _____ HOUR(S): _____

HOURLY RATE (IF APPLICABLE): _____

_____ CONSULTANT FEE TOTAL

_____ TRAVEL EXPENSE

_____ TOTAL CONSULTANT EXPENSE

SCHOOL SYSTEM CONTACT FOR CONSULTANT: _____

CONSULTANT SELECTION REASON: _____

PRINCIPAL SIGNATURE

DATE

DIRECTOR/COORDINATOR SIGNATURE

DATE

IN SIGNING THIS AGREEMENT, I UNDERSTAND THAT THE DOUGLAS COUNTY SCHOOL SYSTEM IS ON A NET 30 DAY PAYMENT SCHEDULE AND THAT I WILL NOT RECEIVE PAYMENT UNTIL 30 DAYS AFTER THE DATE OF INVOICE AND COMPLETION OF SERVICE. I ALSO UNDERSTAND THAT IN ORDER TO INITIATE PAYMENT, I MUST SUBMIT AN INVOICE TO THE ACCOUNTS PAYABLE DEPARTMENT FOR PROCESSING WITHIN 30 DAYS AFTER THE COMPLETION OF SERVICE.

CONSULTANT'S SIGNATURE

DATE

NOTE: If this is a new consultant, entire Vendor Packet must be completed PRIOR to any work being requisitioned or scheduled. This includes the GA Security and Immigration Compliance Act and Contractor Affidavits.

TUTORING CONSULTANTS SHOULD NOTE THAT THEY WILL BE PAID THROUGH THE DCSS PAYROLL SYSTEM.

CONSULTANTS WILL BE REQUIRED BY THE DCSS TO SUBMIT TO A CRIMINAL RECORD CHECK AND FINGERPRINTING IF WORKING IN THE SCHOOL.

CONSULTANTS MUST ABIDE BY POLICIES, RULES, REGULATIONS AND PROCEDURES OF THE DCSS.

CONSULTANTS MUST READ AND BECOME FAMILIAR WITH THE APPROPRIATE DCSS POLICIES AND REGULATIONS.

Originating School/Department _____

Requisition # _____

Budget # _____

Facility # _____

DOUGLAS COUNTY SCHOOL SYSTEM
AGREEMENT FOR CONSULTANT OR CONTRACTOR SERVICES

CONSULTANT/CONTRACTOR _____ SS# _____

DCSS Employee # _____ Position _____ Regular Work Location _____

Name of Company or Business: _____ Taxpayer ID # (for 1099) _____

Address _____ City _____ State/Zip _____

Phone: _____ Email: _____

DCSS Representative: _____ Phone # _____

Background and Qualifications: _____

Title of Activity/ Workshop: _____

Population to be served: Students Teachers Para pros Other _____ Expected Number of Participants: _____

This Agreement is made by and between the Douglas County School System, located at 11490 Veterans Mem. Hwy, Douglasville, GA 30134 (hereafter "DCSS"), and _____, Hereafter "CONSULTANT/ CONTRACTOR".

DCSS agrees to pay CONSULTANT/CONTRACTOR a fee of (check one) \$ _____ per hour not to exceed \$ _____

a flat fee for a total fee not to exceed \$ _____, as compensation for services rendered. Plus allowable travel expenses not to exceed \$ _____, provided that CONSULTANT/CONTRACTOR first submits appropriate receipts for such expense. CONSULTANT/CONTRACTOR shall not be paid in advance. This agreement shall be in effect on

_____ and end on _____ unless terminated by either party at any time, with or without cause. In the

event of termination by DCSS or CONSULTANT/CONTRACTOR prior to completion of the Agreement,

CONSULTANT/CONTRACTOR shall only be entitled to receive just and equitable compensation for any work completed. This

Agreement may be terminated upon 30 days written notice by either party to this Agreement. Such termination shall not be

deemed to be a breach of this Agreement, nor shall it be deemed to tortious conduct.

CONSULTANT/CONTRACTOR shall keep designated district representatives fully informed as to the progress of the work and shall submit to DCSS oral and written reports as DCSS may specify. CONSULTANT/CONTRACTOR will maintain such records as may be necessary to support hours worked, activities, and students served. These records and other data, reports, or materials regarding matters covered by this Agreement, shall be made available for examination as the DCSS may deem necessary. DCSS reserves the right to request supporting documentation for any expenditure(s). District has the right to disallow any expenditure(s) not complying with grant program objectives, Local, State and/or Federal guidelines.

DCSS and CONSULTANT/CONTRACTOR mutually agree that any written material or any copyrightable work of any nature created by CONSULTANT/CONTRACTOR pursuant to this Agreement shall be considered a "work made for hire" and DCSS the "copyright owner" thereof as those terms are defined in Title 17 of the United States Code, Section 101, and that DCSS shall own all rights comprised in the copyright of said written material or copyrightable work. CONSULTANT/ CONTRACTOR shall advise DCSS of any and all materials used, or recommended for use by CONSULTANT/ CONTRACTOR in the performance of this Agreement, that are subject to any copyright restrictions or requirements.

CONSULTANT/CONTRACTOR ACKNOWLEDGES THE FOLLOWING CHECKED BOX(S) MAY REQUIRE ADDITIONAL FORM COMPLETION. YOUR INITIALS ARE REQUIRED FOR THE CHECKED BOXES. THESE STEPS MUST BE COMPLETED PRIOR TO ANY WORK BEING REQUISITIONED OR SCHEDULED.

<input type="checkbox"/>	Company CONSULTANT/CONTRACTOR is not considered an employee of DCSS, and is not entitled to fringe benefits, pension, workers compensation, retirement, etc. District shall not deduct Federal income taxes, FICA (Social Security), or any other taxes required to be deducted by an employer, as this is the responsibility of CONSULTANT/CONTRACTOR. A 1099 will be provided at the end of the year. Contact Business Services with any questions @ 770.651.2376. _____ (Initial)
<input type="checkbox"/>	Individual CONSULTANT/CONTRACTOR who is providing a service at the direction of DCSS staff. DCSS shall deduct FICA (Social Security), Medicare or any other taxes required to be deducted by an employer as per Title 26 - INTERNAL REVENUE CODE, Subtitle C, CHAPTER 25, and Sec. 3509. Under common-law rules, anyone who performs services for you is your employee if you can control what will be done and how it will be done. This is so even when you give the employee freedom of action. What matters is that you have the right to control the details of how the services are performed. Total allowances will be based on Single with zero dependents unless revised G-4 and W-4 forms are received in the payroll office. Forms are located on the DCSS website under Employment, Benefits. Contact Payroll with any questions @ 770.651.2272. _____ (initial)
<input type="checkbox"/>	CONSULTANT/CONTRACTOR is providing services to the district that require completion of the GA Security and Immigration Compliance Act and Contractor Affidavit . If you are a new CONSULTANT/CONTRACTOR completion of the entire Vendor Packet is required. Contact Business Services with any questions @ 770.651.2376. _____ (initial)
<input type="checkbox"/>	When the named CONSULTANT/CONTRACTOR or any person in their employment will have or has the potential to have unsupervised contact with students FINGER PRINT CLEARANCE IS REQUIRED . If at any time during the term of this Agreement CONSULTANT/CONTRACTOR is either notified by the Department of Justice or otherwise becomes aware that any employee of CONSULTANT/CONTRACTOR performing services under this Agreement has been arrested or convicted of a violent or serious felony, CONSULTANT/CONTRACTOR agrees to immediately notify the DCSS and remove said employee from performing services on this Agreement. Contact Human Resources with any questions @ 770.651.2378. _____ (initial)

Principal Signature of Approval

Date

Director/Coordinator Approval

Date

Consultant/Contractor Acceptance of Agreement

Date

Date of Board Approval (if applicable) _____
(FOR CONTRACTS OF \$25,000 OR MORE)

SELF-EMPLOYMENT AGREEMENT

(FIN-632)

This form is to be used for payments from Local School Funds only.

This agreement is to be used for payment to non-employees or vendors who will perform a service for the school and will be paid with a **local school check**.

School _____

* **Individual/Vendor Name:** _____

** If this is the first payment made to this individual/vendor in the current calendar year, a Vendor Form must also be completed and sent to the Finance Office for approval prior to hiring.*

Address: _____

Phone: _____ E-mail: _____

Federal ID or Social Security Number: _____

Date(s) of Service: _____ Total Amount to be Paid: _____

Type of Service to be Performed: _____

Are you currently or have you ever been an employee of the DCSS? (Yes or No) _____

If so, where did you work and what dates? _____

Individual/Vendor Signature

Date

Principal (Designee) Signature

Date

Verification of Receipt of Check

Individual/Vendor Signature

Date

(Signature indicates receipt of check. If check is mailed, a signature is not required.)

Important Notice – Please Read Carefully

The vendor is responsible for reporting this income and paying the appropriate income taxes. Taxes are not withheld from this payment. IRS Form 1099 will be issued to any individual or non-incorporated vendor to whom payments from the Douglas County School System meet or exceed \$600 during the calendar year.

A copy of this form should be provided to the individual/vendor to whom the check is written.

For Office Use Only

Account Number	Check Amount	Check Number	Date Paid

The original form should be sent to the Finance Office. A copy of the form should be filed with the school's financial records.

DOUGLAS COUNTY SCHOOL SYSTEM

The Standard of Excellence

INSURANCE REQUIREMENTS

Upon Notice of Award, Vendor may submit this form to their insurance agent as this form contains requirements that may be non-standard in the insurance industry.

Contractor shall furnish the Douglas County School System certificates of insurance as follows from company or companies acceptable to the Douglas County School System.

A. REQUIRED CERTIFICATES

1. Commercial General Liability Insurance Policy

Vendor shall procure and maintain a Commercial General Liability Insurance Policy, including products and completed operations liability, and contractual liability coverage covering bodily injury, property damage liability and personal injury. The policy or policies must be on any "occurrence" basis unless waived by the Douglas County School System. The policy shall include contractual liability coverage. The policy purchased by the Vendor must be issued by a company authorized to conduct business in the State of Georgia or by a company acceptable to the Douglas County School System. The policy must include separate aggregate limits per project. Excess liability coverage may be used in combination with the base policy to obtain the limits listed below.

Limits

\$1,000,000 per Person

\$1,000,000 per Occurrence

2. Business Automobile Liability Insurance Policy

The Contractor shall procure and maintain a Business Automobile Policy with liability limits of not less than \$1,000,000 per person and \$1,000,000 per occurrence or a policy with a combined single limit of not less than \$1,000,000 covering any owned, non-owned or hired autos. Excess liability coverage may be used in combination with the base policy to obtain these limits.

3. Workers' Compensation Insurance

Workers' Compensation Insurance in accordance with applicable state laws with the following limits:

Limits

Bodily Injury by Accident - \$500,000 each accident

Bodily Injury by Disease - \$500,000 each employee

Bodily Injury by Disease - \$500,000 policy limit

IF YOUR COMPANY IS EXEMPT FROM WORKERS' COMPENSATION INSURANCE IN ACCORDANCE WITH GEORGIA LAW, PLEASE HAVE YOUR INSURANCE COMPANY SUBMIT A LETTER VERIFYING YOUR EXEMPTION.

B. Certificates to contain policy number, policy limits and policy expiration date of all policies issued in accordance with this contract.

C. Certificates shall contain the location and operations to which the insurance applies.

D. Certificates shall contain Vendor's insurance coverage. If coverage is included in General Liability, please indicate this on the Certificate of Insurance.

E. Certificates are to be issued to:

Douglas County School System
P.O. Box 1077, Douglasville, GA 30133

F. The Contractor shall mail insurance document listed in this form to:

Douglas County School System
Business Services
P.O. Box 1077, Douglasville, GA 30133



Mr. Trent North, Superintendent
P.O. Box 1077, Douglasville, GA 30133
11490 Veterans Memorial Highway, Douglasville, GA 30134
770-651-2000 | dcssga.org

