

CITY OF ROSEVILLE

Attention: Rhonda Barsotti - General Accounting 311 Vernon Street

Roseville, California 95678

V: 916-774-5477



Date:

FAX this form to: 916-784-3796 or email .pdf scanned file to: rbarsotti@roseville.ca.us_

W-9 Request for INFORMATION

Required in lieu of IRS W9 when doing business with the City of Roseville

Dear Vendor:

Information contained in this document will be used by the City of Roseville to prepare information returns. Failure to promptly return this fully completed form including Name, Business Name, physical address, phone numbers and Social Security and/or FEIN numbers may delay processing of payments to you and may subject those payments to backup withholding. If Nonresident, payment for services may be subject to state withholding. To expedite processing, please fax to this form or email the

To

| Business Legal Name Remittance Address | | | Business P | Business Phone Fax Number | |
|---|--|--|----------------------|---------------------------|--|
| | | | Fax Numbe | | |
| ty | | | State | Zip | |
| nysical Address of Business | | City | State | Zip | |
| ame of Owner (if Sole Proprietor) | | | | | |
| Social Security Number (sole p | proprietor) | | | | |
| Employer ID Number (Corp, LL | .C or Partnership) | | | | |
| Please check box that applies Sole Proprietor | s to your business | | | | |
| Corporation or Incorporated LLC | In what State? | nat State? Corp Registration # | | | |
| | If NOT a California Cor Address: | rporation, do you have permanen t | t offices in the Sta | ate of California? | |
| Partnership (LLP or LP) | | | | | |
| Exempt (Non-Profit or Governmental | Entity) | | | | |
| Do you provide MEDICAL or LEGA | L services ? | | | | |
| PRODUCT ONLY - No Services pro | | | For off | ice use only | |
| repairs, maintenance, design, caterin | | | INITIAL | | |
| repairs, maintenance, design, caterin | | | INITIAL | | |
| repairs, maintenance, design, caterin I hereby certify under penalty of perjury to | hat the information provided on th | is form is true and correct. | VENDOR # | | |