

## REQUEST FOR TAXPAYER ID NUMBER AND CERTIFICATION SUBSTITUTE FORM W-9

Pursuant to Section 6109 of the Internal Revenue Code, you must furnish your Taxpayer Identification Number (TIN) to the County of Albemarle. If this number is not provided, or your individual name or business name does not match the taxpayer name for your TIN, you may be subject to 24% tax withholding on each payment. You must provide your TIN whether or not you are required to file a tax return. To avoid the 24% withholding and to ensure that accurate tax information is reported to the Internal Revenue Service, please use this form to provide the requested information.

Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.				
Business Name/Disregarded Entity, if dif	ferent from above. NOTE: Pa	yments will be directed	to your business name, if provided.	
Address:				
Street Address				
City	State	Zip Code _		
Remit-To Address:				
Street Address				
City	State	Zip Code	-	
Contact Name: Email:				
Check the appropriate box below for the entity type. 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.  Entity Type: (check only one)				
☐Individual	☐ Sole Proprietorship		tnership	
☐ Corporation	☐ Limited Liability Compan	, ,	E-Exempt or Non-Profit	
□C-Corporation	□Partnership	Organ	lization	
☐S-Corporation	☐ C-Corporation			
	☐S-Corporation			
☐ Disregarded Entity	□Estate			

Entity Classification/Activity: (check only	one)		
☐ Services Only  Check if applicable  ☐ Legal Services ☐ Medical/Health Care	☐Merchandise (goods) only	☐Merchandise & Services	
☐ Federal Government	☐ Political Subdivision	☐ Other Government	
☐Other (Specify	)		
	Exemption from FATCA y use either your SSN or EIN, as your		
Federal Tax Identification Number	or	Social Security Number	
CERTIFICATION: Under penalties of perju	ry, I certify that:		
I am not subject to backup withholding be	ecause: (a) I am exempt from backu ubject to backup withholding as a re er subject to backup withholding; an efined below); and		
backup withholding because you have fai 2 does not apply. For mortgage interest p	led to report all interest and dividen paid, acquisition or abandonment of A), and generally, payments other the	otified by the IRS that you are currently subject to ds on your tax return. For real estate transactions, item secured property, cancellation of debt, contributions to han interest and dividends, you are not required to sign titled Certification on the IRS W-9 form.	
Authorized Signature	Printed I	Name	
Title			

Fax

1.

2.

3. 4.

Phone

Date