

To Our Valued Suppliers:

SWACO suppliers are now required to complete a Registration Packet, which gives SWACO the needed information to manage purchasing and payments more efficiently. The information you provide will assist us in delivering transparency and fairness to you as a SWACO supplier, along with implementing diverse and inclusive practices that align with SWACO's Core Values (<https://www.swaco.org/182/Vision-Mission-Goals>).

The Supplier Registration Packet includes the following documents:

1. Registration Form
2. Non-Discrimination Affidavit
3. Delinquent Tax Affidavit
4. IRS Form W-9 (Rev. March 2024)
5. Acknowledgement Form
6. OPERS Independent Contractor Form (**if there are less than five employees**)
7. Sales and Use Tax Blanket Exemption Form

Suppliers should also include the following documents with their registration packet:

1. Certificate of Liability Insurance
2. Any certifications applicable to validate Certified Business status
3. Any documentation of green business program for being Environmentally Friendly

The Supplier Registration Form requests contact information for two (2) company representatives: General and Signatory. Please provide contact information for both as contracts will be emailed directly to the supplier's signatory for review and signature via DocuSign.

Please complete all forms in the Supplier Registration Packet (OPERS form if applicable) and email them to procurement@swaco.org. Forms must be signed, notarized as required, and must include any required documentation. Submitted documents will be uploaded to your vendor record and will not require updating unless there are any changes. Suppliers will be contacted to update their information after three (3) years through a vendor portal or email notification. Suppliers are responsible for notifying SWACO if any changes occur in their banking information, tax classification, or signatory representative prior to the three-year update request.

Feel free to contact us with any questions.

Sincerely,

Procurement
procurement@swaco.org

Attachment: Supplier Registration Packet

SWACO Supplier Registration Form

Thank you for *Doing Business With Us!* Please complete and return to procurement@swaco.org

Section 1 – Company Information	
Supplier Name (Must match W-9)	
Address (Physical)	
Address (Mailing)	
Telephone Number	
E-Mail Address	
Website Address	
Name of Payee (Must match W-9)	
Address (Mailing) <i>Please attach invoice example</i>	
Date Company was Established	
Legal Structure (Check One)	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Franchise <input type="checkbox"/> Non-Profit <input type="checkbox"/> Joint Venture
Business Classification (Check all that apply and attach...)	<input type="checkbox"/> Local Business <input type="checkbox"/> Environmentally Friendly <input type="checkbox"/> Certified Business <input type="checkbox"/> Equal Opportunity Employer
Type of Work Performed (Check all that apply)	<input type="checkbox"/> Goods/General Services <input type="checkbox"/> Construction <input type="checkbox"/> Professional Services <input type="checkbox"/> Other (list below) <input type="checkbox"/> Legal/Legislative Services _____
Details regarding the Goods and/or Services provided	Please attach a capability statement or additional information regarding the types of work performed.

Section 2 – Company Contact Information	
Primary Contact Person Name and Title	
E-Mail Address	
Telephone (Direct)	
Telephone (Mobile)	
Signatory Contact Person Name and Title	
E-Mail Address	
Telephone (Direct)	
Telephone (Mobile)	

SWACO Supplier Registration Form

Section 3 – Vendor Portal

Vendor Portal Access YES NO

The Vendor Portal provides access to your company information, allows you to upload document updates, and gives access to receive “Request For Quote” opportunities.

Do you want to be notified of bid opportunities? YES NO

Notifications for bid opportunities relating to the *Type of Work Performed* (checked boxes) category are emailed to the primary contact person’s email. If another email address should be added to the notification, please add the email address below:

Section 4: Banking Information

Payment Options ACH | Check

Bank Name

Account Type

Routing Number

Account Number

The electronic payment data above remains in effect until withdrawn by either: a) Written notification to SWACO; b) Death or legal incapacity; c) the financial institution; or d) SWACO.

The information provided in this Supplier Registration Form and its attachments is accurate to the best of my knowledge.

Signature

Printed Name

Printed Title

Email

Phone Number

Attachments:

Acknowledgement Form
Non-Discrimination Affidavit
Delinquent Tax Affidavit
IRS Form W-9 (March 2024)
OPERS Independent Contractor Form
Sales and Use Tax Blanket Exemption form
SWACO Business and Financial Information

NON-DISCRIMINATION AFFIDAVIT

STATE OF _____)

COUNTY OF _____)

_____ being duly sworn, deposes and states that during the term
Affiant
and performance of any agreement of contract between the Solid Waste Authority of Central Ohio
("SWACO") and _____ ("Vendor") that neither Vendor nor
Vendor Name
any subcontractor of Vendor shall discriminate against any employee or qualified applicant for
employment who is both available and qualified for work because of age, race, color, religion, sex,
disability, creed, military status, or national origin. Further, Vendor agrees that neither it nor any
subcontractor shall discriminate based upon age, race, color, religion, sex, disability, creed,
military status, or national origin in any undertaking related to employment including, but not
limited to, such actions as hiring, upgrading, demotion or transfer, recruitment or recruitment
advertising, layoff or termination, rates of pay or other forms of compensation, and selection for
training, including apprenticeship.

Affiant's Signature

Affiant's Printed Name

Sworn to before me and subscribed in my presence this ____ day of _____, 20__.

Notary Public

My Commission Expires: _____

(County)

(State)

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-NEC (nonemployee compensation).
- 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), and 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.

Caution: If you don't 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; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. 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).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441–1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded 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 grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

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 (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(l)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

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 their 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 their 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, but are not limited to, 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, as described in item 4 under "*By signing the filled-out form*" 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.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. 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 are no longer 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.

• **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 for 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 you filed with your application.

• **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or “doing business as” (DBA) name on line 2.

• **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** 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.

• **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. Enter any business, trade, or DBA name on line 2.

• **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner’s name on line 1. The name of the owner 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. 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, enter it on line 2.

Line 3a

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

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or • Sole proprietorship	Individual/sole proprietor.
• LLC classified as a partnership for U.S. federal tax purposes or • LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	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 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

Note: A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

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 on 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 territory, 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 territory.
- 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 as defined under section 581.
- 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 Information, 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) entered 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 territory, 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, enter "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 ITIN. Enter it in the entry space for the Social security number. 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). 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 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/EIN. 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 Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "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, you will generally 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. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

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), ABL 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 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
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 Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (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 on line 1, and enter your business or DBA name, if any, on line 2. 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.)

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

** For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

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 return 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 a questionable credit report, contact the IRS Identity Theft Hotline at 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 877-777-4778 or TTY/TDD 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 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.

Go to 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 territories for use in administering their laws. The information may also 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, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

ACKNOWLEDGEMENT

Please review the classifications below, check the appropriate box, and **attach** any certifications, evidence of being an Equal Opportunity Employer and/or an Environmentally Friendly contractor.

Local Business

Any Vendor that is a domestic corporation, sole proprietorship, partnership, or joint venture that has its principal place of business located within Franklin County, Ohio or a county contiguous to Franklin County, Ohio ("Contiguous County") and that Vendor...

_____ has filed its official documents with the Secretary of State, State of Ohio or the Franklin County Ohio recorder's office or a Contiguous County's recorder's office.

_____ holds a valid vendor's license which indicates its principal place of business is located within Franklin County or Contiguous County.

_____ employs more than one hundred (100) employees in Franklin County, Ohio and/or a county contiguous to Franklin County, Ohio.

_____ has more than fifty percent (50%) of its total employment located within Franklin County, Ohio and/or a county contiguous to Franklin County, Ohio.

Certified Business

Any Vendor that is certified through one of the following programs:

_____ Certified through the City of Columbus.

_____ State of Ohio's Minority Business Enterprise (MBE), Encouraging Diversity Growth and Equity (EDGE), Veteran Business Enterprise (VBE), Women Business Enterprise (WBE), Minority Women Business Enterprise (MWBE), LGBT Business Enterprise (LGBTBE), Small Business Enterprise (SBE), or Federal Disadvantaged Business Enterprise (DBE).

Equal Opportunity Employer

_____ Any Vendor that agrees not to discriminate against any employee or job applicant because of race, color, religion, national origin, military status, sex, physical or mental disability, or age and has implemented equal opportunity employment practices in place.

Environmentally Friendly

_____ Any Vendor that has a verified green business program in place that reduces or minimizes the impact of waste, causing no harm to ecosystems or the environment. Vendors must provide documentation of the Green Business program to qualify as Environmentally Friendly.

None

_____ Vendor is not a Local Business, a Certified Business, an Equal Opportunity Employer, or Environmentally Friendly.

Printed Vendor Name

Representative's E-Mail Address

Vendor Representative's Signature

Representative's Telephone Number

Printed Vendor Representative's Name

Dear SWACO Vendors and Contractors:

This letter is to inform you that as a vendor and/or contractor of SWACO, an Ohio Public Employees Retirement System (OPERS) public employer, statutory laws affect individuals hired as independent contractors, or other classifications, for which no retirement contributions are made to OPERS.

OPERS public employers are required to provide notification to individuals who are independent contractors and who will not have OPERS retirement contributions withheld from their earnings. To be compliant with these statutory laws, we have attached an ***Independent Contractor Acknowledgment*** (PEDACKN) form to be completed if you are considered a business entity.

Please review the definition of a business entity below to determine if you need to fill out a PEDACKN form or not.

A business entity, as defined in Ohio Revised Code 145.037(A), reads as follows:

(A) As used in this section and section 145.038 of the Revised Code, "business entity" means an entity with five or more employees that is a corporation, association, firm, limited liability company, partnership, sole proprietorship, or other entity engaged in business.

Therefore, according to ORC 145.037(A), if you are...

- i. not considered a business entity (Less than five employees), please complete the attached PEDACKN form and return to SWACO as soon as possible.
- ii. considered a business entity (Five or more employees), you do not need to complete the form.

Other questions concerning this form should be directed to Employer Outreach by calling the number listed on the form (1-888-400-0965).

Sincerely,



Barbara Colebank, Procurement Analyst
barbara.colebank@swaco.org

Attachment: PEDACKN



NON-MEMBER ACKNOWLEDGMENT

Ohio Public Employees Retirement System
277 East Town Street, Columbus, Ohio 43215-4642

Employer Services: 1-888-400-0965
www.opers.org

This form is to be completed if you are an individual who begins providing personal services to a public employer on or after Jan. 7, 2013 but are not considered by the public employer to be a public employee (e.g., you are an independent contractor) and will not have contributions made to OPERS.

Employer: Please complete Step 2. The form must be completed and returned to the retirement system no later than 30 days after the individual begins providing personal services to the public employer. You may fax the completed form to 614-857-1152 or email to employeroutreach@opers.org.

If the individual providing this service is receiving a benefit from OPERS, you must submit the Notice of Re-employment or Contract Services of an OPERS Benefit Recipient, form SR-6, in addition to the Non-Member Acknowledgement, form PEDACKN, for the service listed below. Failure to submit the SR-6 form timely may result in an overpayment of pension billed to the employer.

STEP 1: Personal Information

First Name

MI

Last Name

Grid for personal name input

Date of Birth:

Month

Day

Year

Grid for date of birth input

STEP 2: Public Employer Information (To be completed by the Public Employer)

Name of Public Employer for which individual is providing personal services

S o l i d W a s t e A u t h o r i t y

Employer Contact

First Name

MI

Last Name

Grid for employer contact name input

Employer Code

Employer Contact Phone Number

Grid for employer code and phone number input

Service Provided to Public Employer

Grid for service provided input

Start Date of Service

End Date of Service

Month

Day

Year

Month

Day

Year

Grid for start and end date of service input

STEP 3: Acknowledgment

The public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee. Ohio law requires that you acknowledge in writing that you have been informed that the public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee for the services described in Step 2 and that you have been advised that contributions to OPERS will not be made on your behalf for these services.

If you disagree with the public employer's classification, you may contact OPERS to request a determination as to whether you are a public employee eligible for OPERS contributions for this service. Ohio law provides that a request for a determination must be made within five years after you begin providing personal services to the public employer, unless you are able to demonstrate through medical records to the Board's satisfaction that at the time the five-year period ended, you were physically or mentally incapacitated and unable to request a determination.

By signing this form, you are acknowledging that the public employer for whom you are providing personal services has informed you that you have been classified as an independent contractor or another classification other than a public employee and that no contributions will be remitted to OPERS for the personal services you provide to the public employer. This acknowledgment will remain valid as long as you continue to provide the same services to the same employer with no break in service regardless of whether the initial contract period is extended by any additional agreement of the parties. You also acknowledge that you understand you have the right to request a determination of your eligibility for OPERS membership if you disagree with the public employer's classification. **A copy of this form must be sent to OPERS.**

Signature _____ Today's Date _____
Do not print or type name



Sales and Use Tax Blanket Exemption Certificate

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from:

_____ (Vendor's name)

and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase, or both, as shown hereon:

Purchaser must state a valid reason for claiming exception or exemption.

Purchaser's name

Purchaser's type of business

Street address

City, state, ZIP code

Signature

Title

Date signed

Vendor's license number, if any

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either rule 5703-9-10 or 5703-9-25 of the Administrative Code. This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with rule 5703-9-14 of the Administrative Code.

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Sample Only



Business and Financial Information

Business Address

Solid Waste Authority of Central Ohio
4239 London Groveport Road | Grove City, Ohio 43123
Phone: (614) 871-5100
Fax: (614) 871-5103
Website: www.swaco.org

Remit to information (invoices/accounts payable)

Solid Waste Authority of Central Ohio
4239 London Groveport Road | Grove City, Ohio 43123
Contact: Accounts Payable
Email: ap@swaco.org

Business Information

Origination date: 1989
Type of Business: Government, Political Subdivision
TIN/FEIN: 31-1338559
Tax Exempt: Yes

Shipping Addresses

AOB4239 London Groveport Road
Fleet / Operations4109 London Groveport Road
JP Transfer Station2566 Jackson Pike
MR Transfer Station.....4262 Morse Road

Bank Reference

Huntington National Bank
41 S. High Street | Columbus, Ohio 43215
Contact: Eddie Baumann, Gov't. Banking Relationship Mgr.
Phone: (614) 899-8236

Financial Information

Annual Comprehensive Annual Financial Reports (ACFR) and current board financial report is located on SWACO's website:

<https://www.swaco.org/148/Financial-Reports-Budgets>

Trade References

NAPA Auto Parts
2665 W. Dublin Granville Road | Columbus, Ohio 43235
Contact: Amanda King
Email: amanda_king@napastore.com
Phone: (614) 795-4071

Ohio Peterbilt
6240 Enterprise Parkway | Grove City, Ohio 43123
Contact: J. Krauss
Email: jkrauss@ohiopeterbilt.com
Phone: (614) 875-3732

Rea & Associates, Inc.
212 N. Washington Street | Millersburg, Ohio 44654
Contact: Zac Morris
Email: zac.morris@reaadvisory.com
Phone: (330) 521-4539

Ohio Machinery Company
5252 Walcutt Court | Columbus, Ohio 43228
Contact: Wes Stark
Email: wstark@ohiocat.com
Phone: (614) 332-3424

Credit Terms

In consideration of the extension of credit to SWACO, Vendor is hereby authorized to obtain credit and/or financial information from SWACO's bank, other financial institutions or commercial firms with whom SWACO has done business. The authorization to obtain credit information covers both the initial decision to extend credit, as well as the information necessary to update SWACO's credit file as needed. Such permission is granted on the express condition that any such credit and/or financial information will be held in the strictest confidence by Vendor and will be used only for the purposes expressed herein.

SWACO agrees that all merchandise and services will be paid in accordance with the terms and conditions of its purchase order, attached hereto.

Solid Waste Authority of Central Ohio

By: 
Patrick O'Block, Sr. Accounting & Finance Manager

TERMS AND CONDITIONS

1. **ACCEPTANCE.** Vendor's full or partial performance under this Purchase Order ("PO"), or any part thereof, shall constitute acceptance of this Order by Vendor and Vendor agrees to be bound by and to comply with all Terms and Conditions ("Terms") provided hereto. These Terms shall apply to everything listed in this PO and constitute SWACO's offer to Vendor, which SWACO may revoke at any time prior to Vendor's acceptance. This PO is not an acceptance by SWACO of any offer to sell, or any quotation or proposal. Terms and conditions different from or in addition to these Terms, whether contained in any acknowledgment of this PO, or with delivery of any goods or services ("Items") under this PO or otherwise will not be binding on SWACO and SWACO hereby rejects them. These Terms may be modified only by a written document signed by duly authorized representatives of SWACO and Vendor. This PO is non-assignable by Vendor.
2. **TRANSPORTATION & DELIVERY.** All prices are established as F.O.B. Vendor and/or Origin Dock, Freight Prepaid, unless otherwise specifically provided on the front of this PO. Title and risk of loss shall not pass to SWACO until delivery of the Items to the location designated on this PO and acceptance by SWACO. If SWACO rightfully rejects the Items, receives a non-conforming tender, or revokes its acceptance, risk of loss and title shall be deemed to have remained with Vendor. The responsibility for freight damaged merchandise will be assumed by Vendor. Any unauthorized shipment, which will result in excess transportation charges, must be fully prepaid by Vendor.
3. **PRICE.** This PO shall not be filled at a price higher than listed on this PO. If no price is set forth, the Items will be billed at the price last quoted or at the fair market value, whichever is lower, and, in any event, the Items purchased under this PO shall not be billed at a higher price than last quoted or charged without SWACO's specific written authorization. SWACO shall be entitled to set off any amount owed at any time by Vendor or any of its affiliates to SWACO against any amount payable at any time by SWACO in connection with this PO. No extra charges of any kind will be allowed unless specifically agreed to in writing by SWACO. All applicable taxes arising out of transactions contemplated by the PO will be borne by Vendor except as otherwise specified by the parties in writing. If Vendor reduces its prices for such Items during the term of this PO, Vendor shall correspondingly reduce the prices of Items sold thereafter to SWACO under this PO.
4. **INVOICES, PAYMENT, AND TAXES.** Invoices shall be rendered upon completion of services or delivery of goods and shall contain the Purchase Order Number, item number, description of goods or services, quantities, unit prices, date(s) rendered, and total purchase price. Vendor recognizes that SWACO will be treated as a tax-exempt entity, and SWACO will provide Vendor with its exemption certificate upon request. SWACO shall pay invoice(s) received within thirty (30) days of its approval by SWACO.
5. **WARRANTIES.** In addition to any warranty implied by fact or law, Vendor expressly warrants all items to be free from defects in design, workmanship and materials; to conform strictly to applicable specifications, drawings and approved samples, if any; to be fit and sufficient for the propose intended; to be merchantable; and have been produced, sold or furnished in compliance with all applicable laws and regulations. Such warranties, together with any and all other service warranties of Vendor, shall run with SWACO. All warranties shall survive inspection, test, acceptance of and payment by SWACO. In the event of a breach of warranty, SWACO may, at its option, either return for credit or require prompt correction or replacement of the defective or non-conforming Items.
6. **DEFAULT.** Time is of the essence for this PO. SWACO may, by written notice of default to Vendor, (a) terminate all or any part of this PO if Vendor fails to perform, or so fails to make progress as to endanger performance of this PO in accordance with its terms, and does not cure such failure within a period of ten (10) days after receipt of notice from SWACO specifying such failure; and, (b) procure, on such terms as it deems appropriate, Items similar to those so terminate and Vendor will be liable to SWACO for any excess costs for such similar Items. Vendor will continue performance of this PO to the extent not terminated. If Vendor does not comply with SWACO's delivery schedule, SWACO may require delivery by fastest way and charges resulting from the premium transportation shall be fully prepaid and absorbed by Vendor. The rights and remedies of SWACO provided in this Section will not be exclusive and are in addition to any other rights and remedies as provided by the Uniform Commercial Code, by law, at equity, or under this PO.
7. **INSPECTION.** All Items will be subject to inspection and test by SWACO, prior to final acceptance. Final acceptance or rejection of the Item will be made as promptly as practical after delivery, except as otherwise provided in this PO. However, failure to inspect and accept or reject Items or failure to detect defects by inspection will neither relieve Vendor from responsibility for such Items that are not in accordance with this PO nor impose liabilities on SWACO for them. SWACO's payment shall not constitute its acceptance of the Items. Items rejected and those supplied in excess of quantities ordered may be returned to Vendor at Vendor's expense.
8. **CHANGE IN SPECIFICATIONS.** At all times, SWACO shall have the right to make changes to this PO, including drawings and specifications, shipping instructions, quantities and delivery schedule. If any such changes cause an increase or decrease in the cost of or the time required for the performance of any work under this PO, an equitable adjustment in the price and/or delivery schedule will be made. Any claims for adjustments by Vendor must be made in writing within ten (10) days from the date the change is ordered.
9. **COMPLIANCE WITH LAWS.** This PO shall be construed and interpreted solely in accordance with the laws of the State of Ohio, without regard to conflict of law principles that would require the application of any other state's laws. The parties agree that the sole and exclusive jurisdiction and venue for any disputes shall be a state court located in Franklin County, Ohio. Vendor represents and warrants that it is in compliance with and that all Items supplied hereunder have been produced or provided in compliance with the applicable provisions of all Federal, State, or local laws or ordinances and all related lawful orders, rules, and regulations. Vendor shall comply with all provisions, representations, agreements, or contractual clauses required to be included or incorporated by reference or operation of law in this PO.
10. **INDEMNIFICATION.** Vendor shall indemnify and hold harmless SWACO, its Trustees, officers, employees, and representatives from and against all claims, damages, losses, liens, causes of action, suits, judgments, and expenses, including reasonable attorney's fees and other reasonable costs of defense, of any nature, kind, or description, whether based upon negligence, breach of express or implied warranty, strict liability, infringement of intellectual property rights, or any other theory, and from and against all direct, indirect, special, exemplary, incidental or consequential damages of every kind whatsoever, arising out of, by reason of, or in any way connected with the Items, the design, manner of preparation, manufacture, construction, completion, or delivery or non-delivery of any goods and/or services by Vendor, any breach by Vendor of any of its obligations hereunder, or any other act, omission or negligence of Vendor or any of Vendor's employees, agents, subcontractors, or suppliers. Vendor shall, on request, pay or reimburse SWACO for all costs and expenses, including attorneys' fees, as incurred by SWACO in connection with any such claim, demand, litigation, proceeding, loss, or damage.
11. **INSURANCE.** Vendor will maintain Comprehensive General Liability (including Contractual Liability coverage insuring the liabilities assumed in these Terms).
12. **REMEDIES.** Each of the rights and remedies reserved to SWACO in this PO shall be cumulative and additional to any other remedies provided in law or equity. No delay or failure by SWACO in the exercise of any right or remedy shall affect any such right or remedy and no action taken or omitted by SWACO shall be deemed to be a waiver of any such right or remedy.
13. **ENTIRE AGREEMENT.** Provided that there is no written agreement, duly executed by both parties, applying to the transaction, this PO, with such documents as are expressly incorporated by reference, is intended by the parties as a final expression of their agreement with respect to such terms as are included in it, and is intended also as a complete and exclusive statement of the terms of their agreement. No course of prior dealings between the parties and no usage of the trade will be relevant to determine the meaning of this agreement even though the accepting or acquiescing party has knowledge of the nature of the performance and opportunity for objection.