



City of Montgomery, Alabama

City of Montgomery Vendor Information

The following information is required by the City of Montgomery to process new vendors and update current vendors yearly.

Thank you for your interest in doing business with the City of Montgomery.

The following information is required by the City of Montgomery to change current or process new vendors.

For 501c3 nonprofit organizations:

- Current W-9
- 501c3 Letter from the IRS
- E-Verify Company I.D number (MOU) or letter of exemption ****See below information regarding E-verify****
- Current Business License or exemption letter from the City of Montgomery business license department
- Accounts Payable Telephone number
- Accounts Payable Fax number
- Accounts Payable Email address
- Accounts Payable Point of contact
- Remit to address if different from W-9
- Complete Minority Questionnaire
- City Council Request for Charitable Donations
- All 501c3's and or Neighborhood Associations, will have to be updated yearly with the City Clerk's office or Neighborhood Services in order to be eligible for discretionary funds. Including but not limited to, W-9, E-Verify and a Business License.
- Neighborhoods Associations or any Home Owners Associations will need to contact Neighborhood Services to update all appropriate information (334.625.2175).
- ****E-Verify information is not required on companies that have no employees or has no employees that work in the State of Alabama however, a letter/memo from the vendor will be required stating this exemption.**

Please Return All Documents To:

City Clerk's Office, Attn: Randy Weaver, 334-625-3097, rweaver@montgoomeryal.gov



City of Montgomery, Alabama

Form W-9
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

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.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

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

6 City, state, and ZIP code

7 List account number(s) here (optional)

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.

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 (as defined below); and

4. The FATCA code(s) entered on this form (if any), stating that I am exempt from FATCA reporting is correct.

General Instructions

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

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-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.

Print or type. See Specific Instructions on page 3.

Social security number

or

Employer identification number

Signature of U.S. person

Date

Cat. No. 10231X

Form W-9 (Rev. 10-2018)

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City of **Montgomery**, Alabama

MINORITY QUESTIONNAIRE

Please complete this form and return it with your bid proposal. Check all categories that apply to your company.

VENDOR NAME: _____

ADDRESS: _____

PHONE #: _____

EMAIL ADDRESS: _____

IS THE COMPANY MINORITY OWNED: ___ YES _____ NO

IS THE COMPANY OWNED BY: _____ FEMALE _____ MALE _____ BOTH

IS THE COMPANY INCORPORATED _____ YES _____ NO

ETHNICITY OF OWNERSHIP:

_____ ASIAN AMERICAN

_____ AMERICAN INDIAN

_____ BLACK

_____ DISABLED

_____ CAUCASIAN

_____ HISPANIC

_____ OTHER (PLEASE SPECIFY): _____

SIGNATURE: _____

PRINT NAME: _____

TITLE: _____

DATE: _____



City of Montgomery, Alabama

E-Verify



Company ID Number: _____

THE E-VERIFY MEMORANDUM OF UNDERSTANDING FOR EMPLOYERS

ARTICLE I PURPOSE AND AUTHORITY

The parties to this agreement are the Department of Homeland Security (DHS) and the _____ (Employer). The purpose of this agreement is to set forth terms and conditions which the Employer will follow while participating in E-Verify.

E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of Form I-9, Employment Eligibility Verification (Form I-9). This Memorandum of Understanding (MOU) explains certain features of the E-Verify program and describes specific responsibilities of the Employer, the Social Security Administration (SSA), and DHS.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). The Federal Acquisition Regulation (FAR) Subpart 22.18, "Employment Eligibility Verification" and Executive Order 12989, as amended, provide authority for Federal contractors and subcontractors (Federal contractor) to use E-Verify to verify the employment eligibility of certain employees working on Federal contracts.

ARTICLE II RESPONSIBILITIES

A. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the following notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system:
 - a. Notice of E-Verify Participation
 - b. Notice of Right to Work
2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted about E-Verify. The Employer also agrees to keep such information current by providing updated information to SSA and DHS whenever the representatives' contact information changes.
3. The Employer agrees to grant E-Verify access only to current employees who need E-Verify access. Employers must promptly terminate an employee's E-Verify access if the

Page 1 of 13 E-Verify MOU for Web Services Employers | Revision Date 08/01/18

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City of **Montgomery**, *Alabama*

E-VERIFY EXEMPTION

**To: City of Montgomery
Procurement Department
P. O. Box 1111
Montgomery, AL 36101-1111**

RE: E-Verify Exemption Letter

_____ Located in _____

Has no employees in the state of Alabama therefore is exempt from enrolling in Alabama's law regarding E-Verify.

By: _____

Title: _____

Contact #: _____

Date: _____



City of **Montgomery**, *Alabama*

City of Montgomery AL City Council Request for Charitable Donation Form.

Name of Organization: _____

Address of Organization: _____

Contact Person for the organization: Phone Number and Email.

EIN Number of the organization: _____

Mission of organization:

Amount requesting: _____

Reason the funds are needed:

How are the funds going to be used for?

Amount the Councillor is contributing toward event - subject to final approval:

Councillor requesting potential allocation: _____