



Vendor Set-up Form

To be filled out by Vendor ONLY

- New Vendor
 - Reactivate Vendor
 - Address Change
- Vendor Number _____

220 Fourth Avenue South • Kent, WA 98032-5895 • Phone: (253) 856-5235 • Fax: (253) 856-6200

Please fill out completely. An incomplete form will create a delay in our payment(s) to you and your payment(s) could be subject to the IRS required back-up withholding.

Name, as it will appear on check (NO ABBREVIATIONS)			Doing Business As (If different than name on check)		
Payment Address			Business Address		
City	State	Zip	City	State	Zip
()			Accounts Receivable Contact		
Phone Number					

Vendor Type: (check the appropriate box)

- Corporation
- Government Agency
- Individual/Sole Proprietor
- Non-Profit
- Partnership

Check one: This business is

- Minority Owned
- Women Owned
- Both Minority and Women Owned
- Neither

Will you provide medical services to the City of Kent? Yes No

Will you provide legal services to the City of Kent? Yes No

Will you provide services other than medical or legal to the City of Kent? Yes No

Will you provide parts, supplies or materials to the City of Kent? Yes No

Do you pay sales tax to the State of Washington? Yes No

Check here if exempt from Form 1099 reporting, and check your qualifying exemption reason below:

- 1. Corporation, except there is no exemption for medical and healthcare payments or payments for legal services
- 2. Tax Exempt Charity under 501(a), or IRA
- 3. The United States or any of its agencies or instrumentalities
- 4. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions
- 5. A foreign government or any of its political subdivisions

Name (Owner of the Tax Payer Identification Number (EIN or SSN) as name appears on IRS or Social Security Administration Records): _____

Social Security #: _____ or Federal TIN: _____

Under penalties of perjury, I certify that:

- 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,
- 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.

Sign Here Signature _____ Date _____