



New Vendor Set Up Form

Business Name (Doing Business As, same name as the billing invoice):

Legal Name (as shown on your income tax return):

Federal Tax Classification (check only one of the following boxes):

Individual/sole proprietor or single-member LLC

C Corporation

Limited Liability Company

Check the tax classification ___C=C corporation ___S=S corporation

___P=partnership

S Corporation

Partnership

Trust/estate

Other

Legal Address (same as on W-9):

Street Address: _____

City, State Zip: _____

Billing Address (if different from above):

Street Address: _____

City, State Zip: _____

Contact Information:

Name: _____

Phone Number: _____

Fax Number: _____

Email address: _____

What type of items or service will this vendor be supplying?

ALL VENDORS MUST COMPLETE and SUBMIT A W-9 FORM and INSURANCE CERTIFICATE for both General Liability and Workers Comp. THESE FORMS MUST BE SUBMITTED TO nbrannan@ave1properties.com.

Please verify that the W-9 is completed. The Social Security Number (SSN) or the Employer Identification Number (EIN) should be listed. Both numbers should not be listed. The number that the vendor uses to file a tax return should be listed. The W-9 should be signed and dated. Any forms submitted without all fields completed, a W-9, insurance certification showing proof of general liability coverage and workers compensation coverage (or if none, a workers compensation waiver provided by your insurance company), will be deemed incomplete and rejected. No employee or any other representative of applicant can conduct work on the property until this information is received and verified.

All Invoices must be submitted to invoices@ave1properties.com with an accompanying work order.