

Thank you for your interest in working with BrandPoint Services. Please see below the following onboarding documents that will need to be executed and returned to lsteinline@brandpointservices.com to get you onboarded as an approved vendor in our system.

1. Master Subcontractor Agreement – all 6 pages must be returned. The first 5 pages must be initialed, and the last page needs a signature.
2. Vendor Application – all 4 pages must be executed and returned.
3. W9
4. COI (Certificate of Insurance – below is our sample COI. It is required that BrandPoint Services be listed as additionally insured and listed as primary and noncontributory.
5. ACH Authorization Form – this form is optional – A COPY OF A VOIDED CHECK WILL NEED TO BE SUBMITTED if this form is utilized.
6. Vendor Skills – you will be chosen for new jobs based on the skills you circle on this document.
7. Rate Card

If you have any questions or concerns, please do not hesitate to contact me directly.

We look forward to working with you and having your company as a member of the BrandPoint Services team.



Lenny Steinline
SR Manager Vendor Recruiting & Compliance
267-485-5552 Office
267-215-2466 FAX
BrandPointServices.com



MASTER SUBCONTRACTOR AGREEMENT

THIS MASTER SUBCONTRACTOR AGREEMENT ("MSA") is made effective _____ (the "Effective Date"), between Rhombus Services LLC, d/b/a BrandPoint Services ("BPS"), 820 Adams Ave, Suite 130, Trooper, PA 19403; and _____ ("Subcontractor"), located at _____.

1. **AGREEMENT:** BPS hereby appoints Subcontractor and Subcontractor agrees to serve as BPS' non-exclusive service subcontractor in support of one or more BPS customers ("Customer(s)"). This is a MSA covering the overriding terms and conditions of the relationship between the parties. Subcontractor shall act at all times as an independent contractor and not as the agent, partner, employee, or joint venture of BPS. Subcontractor shall have no authority to obligate BPS in any manner or to accept service on its behalf. All employees and agents of Subcontractor shall remain exclusively under Subcontractor's control, and BPS shall have no obligation to such individuals to provide for their compensation, benefits, insurance, tax, or other payroll withholding.

2. **SUBCONTRACT WORK ORDERS:** The individual Customers to be served by Subcontractor, the specifications and/or scope of services ("Subcontract Work") pertaining to each Customer shall be specified by BPS in separate Work Orders ("Subcontract Work Order(s)"), which will become effective as of the dates issued by BPS and will be deemed incorporated into and made part of this MSA. Subcontractor will not undertake any change to the Subcontract Work without the prior written consent of BPS. If Subcontractor undertakes any additional work or change order without such prior written consent, Subcontractor agrees that performance of such work shall be at Subcontractor's sole risk, cost and expense and, notwithstanding the foregoing, any such additional work or change order shall be deemed to have been performed subject to Subcontractor's obligations under these Subcontract Work Orders.

3. **COMPLIANCE WITH LAWS.** Subcontractor shall comply with all laws and regulations that may be applicable to the Subcontract Work at its own cost. Subcontractor shall also comply with all laws regarding licensing, permits, and approvals for the Subcontract Work. Subcontractor shall be liable to BPS for any and all losses, costs, or expenses, attributable to any acts or omissions by Subcontractor, its employees, subcontractors or agents, for failure to comply with laws, including but not limited to fines, penalties, or corrective measures.

4. **SAFETY.** To protect persons and property, Subcontractor shall establish a safety program implementing safety measures, policies, and standards conforming to (a) those required or recommended by governmental and quasi-governmental authorities having jurisdiction, and (b) requirements of any agreement applicable to the Subcontract Work Order. Subcontractor shall keep the Subcontract Work site clean and free from debris resulting from the Subcontract Work.

5. **WARRANTIES.** Subcontractor warrants that all materials and equipment shall be new unless otherwise specified, of good quality, in conformance with all contractual requirements, and free from defective workmanship and materials. Subcontractor further warrants that the Subcontract Work shall be free from material defects not intrinsic in the design or materials required in the Subcontract Work Order. Subcontractor's warranty does not include remedies for defects or damages caused by normal wear and tear during normal usage, use for a purpose for which the Subcontract Work was not intended, improper or insufficient maintenance, modifications performed by others, or abuse. Subcontractor's warranties shall commence on the date of substantial completion of the Subcontract Work or a designated portion. Unless otherwise provided, Subcontractor agrees to provide a two (2) year warranty on all Subcontract Work. In the event of a conflict regarding warranty terms, the longer warranty period shall apply.

6. INDEMNITY. To the fullest extent permitted by law, Subcontractor shall indemnify, defend and hold harmless BPS, BPS' parent companies, affiliates, its members, directors and officers, other contractors or subcontractors, any design professional, the Owner/Client, and their agents, Subcontractors, and employees (the "Indemnitees") from all claims for bodily injury and property damage, that may arise from the performance of the Subcontract Work, including but not limited to reasonable attorneys' fees, costs, and expenses, that arise from the performance of the Work, but only to the extent caused by the negligent acts or omissions or willful misconduct of Subcontractor, its employees, subcontractors or agents, or anyone employed directly or indirectly by any of them or by anyone for whose acts any of them may be liable.

7. SUBCONTRACTOR'S INSURANCE. Subcontractor and Sub-subcontractors shall purchase, maintain and provide a certificate of insurance prior to inception of work naming Rhombus Services LLC, d/b/a BrandPoint Services and Owner/Client (if requested) as Additional Insured on their commercial general liability policies using ISO Additional Insured Endorsement CG 20 10 and CG 20 37. This insurance for the additional insured will be on a primary and non-contributory basis and apply to both ongoing Operations and Completed Operations. The insurance carriers must be authorized to do business in all states and/or provinces relevant to the Subcontract Work. Subcontractor shall not begin performing services hereunder until original certificates of insurance showing evidence of the insurance with the coverage and limits of liability listed below have been furnished to and approved by BPS.

7.1.1 Workers' Compensation and Employers' Liability Insurance covering Subcontractor all persons employed or utilized by Subcontractor with the following limits: (i) Statutory Workers' Compensation Limits as required by state law and (ii) Employers' Liability limits of not less than \$500,000/\$500,000/\$500,000.

7.1.2 Commercial General Liability Insurance insuring Subcontractor's ongoing Operations and Completed Operations as follows:

- (i) One million dollars (\$1,000,000) per occurrence;
- (ii) Two million dollars (\$2,000,000) general aggregate to include premises operations, products/completed operations, full contractual, personal injury & advertising liability;
- (iii) One million dollars (\$1,000,000) personal and advertising injury;
- (iv) Two million dollars (\$2,000,000) products and completed operations aggregate;
- (v) Limits must apply on a "per project" basis;
- (vi) Must include Contractual Liability covering the duty to indemnify assumed by Subcontractor under this agreement or Subcontract Work Orders, independent contractors, waiver of subrogation, no cross suits or insured vs. insured exclusion if that exclusion applies to additional insureds, and separation of insureds clause.

7.1.3 Subcontractor also agrees to satisfy any insurance requirements required by any governmental authority and those required by any agreement between BPS and Owner/Client.

7.2 CANCELLATION, RENEWAL, AND MODIFICATION. To the extent commercially available to Subcontractor from its current insurance company, all required insurance policies must contain a provision that the insurance company or its designee must give BPS written notice transmitted in paper or electronic format: (a) 30 days before coverage is not renewed by the insurance company and (b) within 10 business days after cancellation of coverage by the insurance company. Prior to commencing the Subcontract Work and upon renewal or replacement of the insurance policies, Subcontractor shall furnish BPS with certificates of insurance in effect until one year after substantial completion or longer if required by any applicable agreement. In addition, if any insurance policy required under this agreement or Subcontract Work Orders is not to be immediately replaced without lapse in coverage when it expires, exhausts its limits, or is to be cancelled, Subcontractor shall give BPS prompt written notice upon actual or constructive knowledge of such condition.

7.3 CONTINUATION OF COVERAGE. Subcontractor shall continue to carry Completed Operations Liability Insurance for at least one year after final payment to BPS. Prior to commencement of the Work, Subcontractor shall furnish BPS with certificates evidencing the required coverage.

7.4 PROPERTY INSURANCE. If not covered under the Builder's Risk Policy of insurance or any other property or equipment insurance required by the Subcontract Documents, Subcontractor shall procure and maintain, at Subcontractor's own expense, property and equipment insurance for the Subcontract Work, including portions of the Subcontract Work stored off the site or in transit, when such portions of the Subcontract Work are to be included in an application for payment.

7.5 WAIVER OF SUBROGATION. Subcontractor shall provide waivers of subrogation in favor of BPS and Owner/Client. Subcontractor further agrees to waive any subrogation rights against Owner/Client and BPS and any of their subcontractors, sub-subcontractors, agents or employees with respect to general liability and workers' compensation claims and for damages caused by fire or other causes of loss to the extent covered by property insurance provided under any agreement with Owner/Client or other property insurance applicable to the Subcontract Work. Subcontractor's policies of insurance shall contain such waivers of subrogation by endorsement or otherwise. A waiver of subrogation shall be effective as to a person or entity even though that person or entity would otherwise have a duty of indemnification, contractual or otherwise, did not pay the insurance premium directly or indirectly, and whether or not the person or entity had an insurance interest in the property damaged.

8. PAYMENT TERMS. As a condition precedent to payment, Subcontractor agrees to furnish to BPS detailed invoice(s) with appropriate supporting documentation required by BPS. Subcontractor agrees to provide, if and when requested by BPS, payroll affidavits, receipts, vouchers, releases of claims for labor, material and other subcontractors and suppliers performing work or furnishing materials for the Subcontract Work, all in a form satisfactory to BPS. If BPS disputes or questions any part or all of an invoice, BPS shall so advise Subcontractor in writing, and BPS shall have the right to withhold any disputed or questioned amounts until such time as such disputes or questions are resolved. In the event of any dispute regarding the Subcontract Work or any invoice related thereto, Subcontractor shall continue to carry on the performance of the Subcontract Work and maintain the progress during any such dispute or proceeding to resolve the dispute, and BPS shall continue to make payments of undisputed amounts to Subcontractor.

Notwithstanding the foregoing, the following payment terms shall apply to all Subcontract Work:

- Payment terms are net forty-five (45) days from the date that an invoice is approved by BPS in accordance with the terms of this MSA unless approved otherwise in the sole discretion of BPS.
- BPS shall be permitted but not obligated to take a discount on any invoice submitted by Subcontractor as follows:
 - 5% discount if BPS pays the Subcontractor within 15 Days, or
 - 3.5% discount if BPS pays the Subcontractor within 30 Days.
- BPS is not required to take any legal action to seek or enforce payment by any of its Clients to Subcontractor.
- BPS is not obligated to pay Subcontractor until BPS receives payment from its Client for the Subcontract Work.
- Subcontractor assumes the risk of non-payment by BPS' Clients for any reason including, but not limited to, bankruptcy, insolvency, reorganization, financial distress, non-performance, dissatisfaction with work, or any other reason in or out of the control of BPS
- Under no circumstances shall Subcontractor or its officers, shareholders, employees, contractors, subcontractors or agents be permitted seek to collect payment from BPS' Clients.

- Subcontractor agrees to utilize any existing or newly developed systems or process of BPS, including but not limited to BPS' process for ordering parts or materials from material suppliers which are approved at the sole discretion of BPS and BPS' Clients.
- Subcontractor and/or key staff will conduct a quality assurance visit with client and/or BPS staff as determined by BPS.
- A member of the Subcontractor's management staff will conduct QA check on each BPS site completed within 48 hours of site completion unless waived by BPS.
- Please note that a separate invoice is required for each Subcontract Work Order.
- For payment to be processed by BPS for an invoice, a Subcontractor must submit the following documentation within 48 hours of work completion:
 1. Invoice for the work referencing Subcontract Work Order number (not a copy of the proposal);
 2. Location sign-off, in form and substance satisfactory to BPS;
 3. Before and after digital pictures satisfactory to BPS;
 4. Current insurance certificates satisfying the section #7 herein, & W9 on shall be file with BPS before any Subcontractor work begins; and
 5. Such other documents that are required by BPS, including, but not limited to, lien waivers.
- Invoices will not be processed in the absence of any required documentation or failure to comply with the procedure as described herein.
- Invoice Dates will be dated on the day on which all required documentation is received and approved by BPS and not the date on which the Subcontractor sends its initial invoice to BPS.
- BPS may withhold from any payment due, or to become due, to Subcontractor, an amount sufficient to reimburse BPS on account of any correction or re-execution re-fulfillment of those portions of any work which is defective or has not been performed pursuant to the Subcontract Documents or on account of any damage caused by the Contractor.
- If, in order for BPS to receive payment from the Owner/Client, Subcontractor agrees to sign any and all written waivers/confirmations that it has been paid "in part" or "in full".

9. LIENS. Subcontractor shall at all times indemnify and hold BPS harmless against all liability for claims and liens for labor performed or materials used or furnished used for the Subcontract Work Orders, including any costs and expenses for attorneys' fees and incidental or consequential damages resulting to BPS from such claims or liens. Further, in case suit is brought on such claims, Subcontractor shall defend any such suit at its own cost and expense, including defense of BPS, and will pay and satisfy any such lien or judgment as may be established by the decision of the court. Subcontractor agrees within ten (10) calendar days after written demand from BPS to cause such claim, suit, or lien to be removed from the subject property, and in the event Subcontractor fails to do so, BPS is authorized to use such means as it deems necessary to cause such claim, lien, or suit to be removed and dismissed and the resulting cost, together with reasonable attorneys' fees, shall be immediately due and payable to BPS by Subcontractor. Subcontractor may litigate any such claim, lien or suit, provided that it first causes such claim, lien or suit to be removed promptly, in advance, from the subject property.

10. CONFIDENTIAL INFORMATION. "Confidential Information" means information concerning BPS that is disclosed to Subcontractor that is not generally known to the public, whether in tangible or intangible form, including but not limited to information concerning its Clients (including past, present and prospective Clients), financial condition, operations, marketing, suppliers, employee information, trade secrets, sales, products, services, accounts, intellectual property, or information relating to existing or contemplated businesses, products and/or services of BPS. All information, plans, proposals, correspondence and other documents and

materials provided or communicated by BPS to the Subcontractor shall be considered "Confidential Information" for purposes of this MSA.

11. **NON-DISCLOSURE OF CONFIDENTIAL INFORMATION.** Subcontractor shall hold in strict confidence and shall not disclose any Confidential Information of BPS and shall not use the Confidential Information for any purpose other than in relation to the specified Subcontract work for BPS. Subcontractor shall not, directly or indirectly, (a) disclose, reveal or make available to anyone any Confidential Information of BPS, (b) assist or enable anyone to access or use any Confidential Information of BPS, or (c) use or exploit any Confidential Information of BPS for any purpose whatsoever. In the event that the parties cease the relationship, or written demand from BPS (which demand may be made at any time and for any reason), the Subcontractor shall cause all of BPS's Confidential Materials in the Subcontractor's possession or control to be returned to BPS; except, however, to the extent BPS's Confidential Information is contained in electronic, magnetic or similar media of the Subcontractor such that transfer of possession is impractical, the Subcontractor shall delete or destroy such Confidential Information.

Subcontractor's obligations of confidentiality with respect to Confidential Information received hereunder shall extend from the date of this Agreement for five (5) years from the date of each separate disclosure.

12. **NON-SOLICIATION.** Subcontractor acknowledges and recognizes the highly competitive nature of the business of BPS and accordingly agrees that for a period of five (5) years from the later of the date of this Agreement or the conclusion of Subcontractor's engagement with BPS:

12.1 Subcontractor shall not directly or indirectly hire or solicit, induce or influence, or attempt to induce or influence, or assist in the hiring or solicitation of any person who, at any time during the twelve (12) month period prior to such hiring or solicitation was an employee of BPS, or otherwise entice or encourage any such person either to leave BPS's employ or to provide services to any BPS competitor.

12.2 Subcontractor shall not directly or indirectly circumvent the efforts of BPS by pursuing any past, present, or prospective customers of BPS, or any other commercial ventures that come to its attention by virtue of the Confidential Information of BPS, absent an agreement for compensation. Without limiting the scope of any of the other provisions of this MSA, this non-circumvention provision is intended to preclude the Subcontractor, and its agents, representatives, affiliates and other related parties, or parties acting on behalf of or at the direction of BPS from pursuing commercial ventures or relationships based on Confidential Information, absent advance written approval of BPS.

13. **REMEDIES.** In the event of any breach or threatened breach of this MSA, BPS shall be entitled, without the requirement of posting a bond or other security, to enforce this MSA in accordance with the terms hereof by seeking immediate equitable relief, including specific performance and/or a temporary, preliminary, and permanent injunction from any court of competent jurisdiction. BPS may pursue both monetary damages and equitable relief concurrently or consecutively, in any order, as to any breach or threatened breach of this agreement, and the pursuit of any one of such remedies at any time will not be deemed an election of remedies or waiver of the right to pursue any other remedies, it being agreed that all remedies provided herein shall be cumulative with, not exclusive of, any other remedies that may be available at law or in equity.

14. **REASONABLE RESTRICTIONS.** Subcontractor acknowledges and agrees that the covenants and restrictions contained in this MSA are reasonable in scope, area, and duration and are necessary to protect BPS's business, good will, confidential information, trade secrets, and relationships with its customers, whether past, present, or prospective.

15. **SEVERABILITY.** If any provision of this MSA or the application thereof to any person, place or circumstance, shall be determined by a court of competent jurisdiction to be invalid or unenforceable for any reason, the remaining provisions of this Agreement shall continue in full force and effect, unaffected by such determination.

16. **JURISDICTION AND GOVERNING LAW.** This MSA shall be construed and governed by and under the laws of the Commonwealth of Pennsylvania, without regard to its conflicts of laws principles. Any action relating to this MSA shall be commenced and concluded only in the Commonwealth of Pennsylvania before the Court of Common Pleas of Montgomery County or the United States District Court for the Eastern District of Pennsylvania.

17. **REPRESENTATION ON AUTHORITY.** Each person signing the MSA represents and warrants that he or she is duly authorized and has legal capacity to execute and deliver the MSA and the Subcontract Work Orders. Each party represents and warrants to the other that the execution of the MSA and the performance of such party's obligations hereunder have been duly authorized and that the MSA is a valid and legal agreement binding in such party, its agents, representatives, affiliates and other related parties, or parties acting on behalf of or at the direction of such party and enforceable in accordance with its terms.

18. **TERM.** The MSA term shall begin on date of the first Subcontract Work Order, and will continue until terminated by either party (the "Term").

Company Name: _____

Signed

Print Name

Title

Date



BrandPoint Services, Inc. ("BPS") Subcontractor Application and Qualification Form

SECTION A – BUSINESS INFO			
Business Name:		Non Union	Union
Mailing Address:			
Billing Address:			
Primary Contact		Title	Phone/email
Dispatch Email:		Cell Phone #:	
Financial Contact :			
Office #:		Fax #:	
Type of Business:			
State of Incorporation:			
Federal ID or Tax ID Number:			
Name Doing Business As:			
	Corporation		
	Partnership	(List Partners and Contact info on separate sheet)	
	Proprietorship	(List Proprietor and Contact info on separate sheet)	
Date Business Established:			
State License #:			
SECTION B – CAPACITY			
How many years have you been doing commercial work?			
Number of Technicians			
Employees/Sub Crews			
How much (\$) on average can you cash flow for the 60 day terms?			
What is your coverage radius (in miles)			



SECTION C – EXPERIENCE

Briefly describe your commercial experience, especially related to Retail, Hospitality, Healthcare and Banking.

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SECTION D – SKILLS

<input type="checkbox"/> Painting	<input type="checkbox"/> ACT Restoration
<input type="checkbox"/> Floor Installation	<input type="checkbox"/> Faux Finishes
<input type="checkbox"/> Handyman Work	<input type="checkbox"/> Interior Staining / Refinishing (Millwork)
<input type="checkbox"/> Minor Carpentry <input type="radio"/> Framing	<input type="checkbox"/> Wallcovering
<input type="checkbox"/> Masonry Repair	Wood Flooring Refinishing (Check Below)
<input type="checkbox"/> EIFS Patching / Repairs	<input type="checkbox"/> Complete Staining <input type="checkbox"/> Minor Staining
<input type="checkbox"/> Drywall Patching/replacement	<input type="checkbox"/> Electrical <input type="radio"/> Lighting- Interior/Exterior
<input type="checkbox"/> HVAC	<input type="checkbox"/> Plumbing <input type="radio"/> Appliance Repair
<input type="checkbox"/> Specialty Finishes (Please describe on right):	<input type="radio"/> Telecom/ Data Cabling <input type="radio"/> Digital Signage
<input type="checkbox"/> Other (Please describe on right):	

SECTION E – REFERENCES

LARGEST COMMERCIAL CLIENT

Company Name:					
Address:					
City:		ST:		ZIP:	
Contact Name:					
Contact Phone:		Email:			



TRADE / SUPPLIER REFERENCE				
Company Name:				
Address:				
City:		ST:		ZIP:
Contact Name:				
Contact Phone:		Email:		

BANK REFERENCE				
Company Name:				
Address:				
City:		ST:		ZIP:
Contact Name:				
Contact Phone:		Email:		

SECTION F – BACKGROUND CHECKS

At a minimum, BPS requires SSN verification and criminal background searches for all workers. If you have already completed this process with your employee crews and/or subcontractor crews, please indicate below:

Employee Crews Sub Crews

Please initial here to acknowledge completion of this process:

SECTION G – TERMS AND CONDITIONS

1. INSURANCE.
 - 1.1. SUBCONTRACTOR'S INSURANCE. Before commencing the Subcontract Work, and as a condition precedent to payment, Subcontractor shall purchase and maintain insurance that will protect itself and BPS from any and all claims arising out of its operations under the Subcontract Documents, whether the operations are by Subcontractor, or any of its subcontractors, employees or agents, or anyone directly or indirectly employed by any of them, or for whose acts Subcontractor may be liable.
 - 1.2. MINIMUM LIMITS OF LIABILITY. The insurance requirements of BPS include, but are not limited to, the following:
 - 1.2.1. Workers' Compensation and Employers' Liability Insurance covering all persons employed by Subcontractor with the following limits: (i) Statutory Workers' Compensation Limits as required by state law; and (ii) Employers' Liability limits of not less than \$500,000/\$500,000/\$500,000.
 - 1.2.2. Commercial General Liability Insurance covering Subcontractor's ongoing Operations and Completed Operations as follows:
 - I. One million dollars (\$1,000,000.00) per occurrence
 - II. Two million dollars (\$2,000,000.00) general aggregate
 - III. One million dollars (\$1,000,000) personal and advertising injury

- IV. Two million dollars (\$2,000,000) products and completed operations aggregate
- V. Ten thousand dollars (\$10,000) medical payments, per person
- VI. Limits must apply on a "per project" basis
- VII. Additional insured status must apply on a primary and non-contributory basis and apply to both ongoing Operations and Completed Operations
- VIII. Must include Contractual Liability covering the duty to indemnify assumed by Subcontractor under this agreement or Subcontract Documents, independent contractors, waiver of subrogation, no cross suits or insured vs. insured exclusion if that exclusion applies to additional insureds, and separation of insureds clause.

1.2.3. Commercial Automobile Liability Insurance covering all owned, non-owned and hired autos, including the loading and unloading thereof with a combined single limit of at least \$1,000,000.

1.2.4. Builder's Risk Insurance or its equivalent, with per occurrence limits of coverage not less than one hundred percent (100%) of the full replacement cost of the Subcontractor's Work done on the Project.

1.2.5. Commercial Umbrella/Excess Liability Insurance with limits of no less than 1,000,000 and which must follow form.

1.2.6. Subcontractor also agrees to satisfy any insurance requirements required by any governmental authority and those required by any agreement between BPS and Owner/Client.

- 2. Neither the submission of this Application nor its approval constitute any grant of rights to perform any work, nor any warranty that Subcontractor will get any work now or in the future from BPS.
- 3. In the event that Subcontractor is offered the right to perform any work for BPS, Subcontractor will need to comply with all requirements of BPS, including the execution of the then-current Work Order and Terms & Conditions.

Submissions required with this form:

- 1. W9 (Business registration form/ID # if in Canada)
- 2. Workers' Compensation & Liability Insurance Certificates, with BrandPoint Services, Inc., 820 Adams Ave, Suite 130; Trooper, PA 19403 listed as Certificate Holder and as additional insured
- 3. Copy of state license (as required).
- 4. References (see Section F)

Agreement:

I, _____, attest that the information provided herein is accurate and complete, fully understand the conditions and requirements as described herein, and agree to be governed by said conditions and requirements. The undersigned acknowledges that he/she has the authority to submit this Application on behalf of the individual or business entity identified in Section A above.

Name (Print)		Title	Witness (Print)
Signature	Date	Signature	Date

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		
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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									
				-			-		

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									
				-					

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 (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

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. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If 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).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

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

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

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 his or her 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 his or her 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 not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, 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 Part II instructions on page 3 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 under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

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 no longer are 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

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the “Name” line and any business, trade, or “doing business as (DBA) name” on the “Business name/disregarded entity name” line.

Disregarded entity. Enter the owner's name on the “Name” line. The name of the entity entered on the “Name” line should never be a disregarded entity. The name on the “Name” line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the “Name” line. 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 the “Business name/disregarded entity name” line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the “Name” line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the “Name” line is an LLC, check the “Limited liability company” box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter “P” for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter “C” for C corporation or “S” for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the “Name” line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the “Name” line.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

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 possession of the United States, or any of their political subdivisions or instrumentalities,
 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
 5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
 7. A foreign central bank of issue,
 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 10. A real estate investment trust,
 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 12. A common trust fund operated by a bank under section 584(a),
 13. A financial institution,
 14. A middleman known in the investment community as a nominee or custodian, or
 15. 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 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 7 ²

¹ See Form 1099-MISC, Miscellaneous Income, 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, and payments for services paid by a federal executive agency.

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 individual taxpayer identification number (ITIN). Enter it in the social security number box. 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. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 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 Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. 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/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "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, generally you will 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.

Caution: A disregarded domestic 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, below, and items 4 and 5 on page 4 indicate 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 the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

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 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), 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)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. 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
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation 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 and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. 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.) Also see *Special rules for partnerships* on page 1.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

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, social security number (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 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 credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system 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 1-877-777-4778 or TTY/TDD 1-800-829-4059.

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 at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov 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. possessions for use in administering their laws. The information also may 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, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



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SERVICES®

ACH Authorization Form
(Electronic Payments)

Name / Business Name:
Phone Number:
Address (street address, city, state, zip):
Email address (this is where notification of deposits will be sent):
Receiving Bank Name:
Receiving Bank Address (street address, city, state, zip):
Account Type (select one): <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS
Bank Account Number:
Bank Routing Number:

Please provide copy of voided check

I hereby authorize BrandPoint Services to deposit any amounts owed me by initializing credit entries to my accounts at the financial institution indicated on this form. Further, I authorize my bank to accept and to credit any credit entries indicated by BrandPoint Services to my account. In the event that BrandPoint Services deposits funds erroneously into my account, I authorize BrandPoint Services to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until BrandPoint Services and my financial institution have received written notification from me of its termination in such time and in such manner as to afford BrandPoint Services and my financial institution reasonable opportunity to act on it.

Name (Printed): _____

Signature: _____ Date: _____

VENDOR SKILLS

(Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> A/V | <input type="checkbox"/> MASONRY REPAIR |
| <input type="checkbox"/> ABATEMENT- REMEDIATION | <input type="checkbox"/> MILLWORK |
| <input type="checkbox"/> ACT RESTORATION | <input type="checkbox"/> MINOR CARPENTRY |
| <input type="checkbox"/> APPLIANCE REPAIR | <input type="checkbox"/> OVERHEAD DOORS |
| <input type="checkbox"/> AUTOMATIC DOORS | <input type="checkbox"/> PAVING |
| <input type="checkbox"/> BACKFLOW TESTING | <input type="checkbox"/> PAINTING |
| <input type="checkbox"/> BOARD UP | <input type="checkbox"/> PEST CONTROL |
| <input type="checkbox"/> CARPENTRY | <input type="checkbox"/> PLUMBING |
| <input type="checkbox"/> CLEANING SERVICES | <input type="checkbox"/> PRESSURE WASHING |
| <input type="checkbox"/> COMPUTER SERVICE/REPAIR | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> CONCRETE | <input type="checkbox"/> SNOW REMOVAL |
| <input type="checkbox"/> DEMOLTION | <input type="checkbox"/> SPECIALTY FINISHES |
| <input type="checkbox"/> DIGITAL SIGNAGE | <input type="checkbox"/> STAFFING |
| <input type="checkbox"/> DRYWALL | <input type="checkbox"/> STORAGE/WAREHOUSE |
| <input type="checkbox"/> EIFS PATCHING/REPAIRS | <input type="checkbox"/> TELECOM/DATA CABLING |
| <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> WALLCOVERING |
| <input type="checkbox"/> EQUIP | <input type="checkbox"/> WATER TREATMENT |
| <input type="checkbox"/> FAUX FINISHES | <input type="checkbox"/> WINDOWS |
| <input type="checkbox"/> FECING | <input type="checkbox"/> WOOD FLOORING REFINISHING |
| <input type="checkbox"/> FIRE – SPRINKLER | |
| <input type="checkbox"/> FIXTURE INSTALLATION | |
| <input type="checkbox"/> FLOOR COATING | |
| <input type="checkbox"/> FRAMING | |
| <input type="checkbox"/> GENERAL CONTRACTOR | |
| <input type="checkbox"/> GLASS | |
| <input type="checkbox"/> GRAFFITI REMOVAL | |
| <input type="checkbox"/> HANDYMAN WORK | |
| <input type="checkbox"/> HVAC | |
| <input type="checkbox"/> JETTING | |
| <input type="checkbox"/> LANDSCAPING | |
| <input type="checkbox"/> LIGHTING-INTERIOR/EXTERIOR | |
| <input type="checkbox"/> LOCKSMITH | |

OTHER (PLEASE DESCRIBE:

RATE CARD

Standard rate for all services offered? Yes No

If YES, \$ _____ / HOUR

If NO, please describe below:

SKILL/TRADE:	RATE: \$
SKILL/TRADE:	RATE: \$
SKILL/TRADE:	RATE: \$
SKILL/TRADE:	RATE: \$
SKILL/TRADE:	RATE: \$

Trip Charge? Yes No

If YES, \$ _____

Overtime Rate: \$ _____

Do you schedule work on the weekends? Yes No

If YES, \$ _____ / HOUR

Do you handle emergency calls? Yes No

If YES, \$ _____ / HOUR

Holiday Pay: \$ _____ / HOUR

Any other rate stipulations we should be aware of? Yes No

If YES, please describe: _____