



Phone: 717-650-1472
 Email: quality@blmconstruction.net
 Address: 2415 W Market St. Unit 3 York, PA 17404
 HIC#: PA022567

Subcontractor and Vendor Setup Form

Billing Information

Legal Name (Make Checks Payable To): _____
 Doing Business As (If Different From Above): _____
 Contact Name: _____
 Street Address: _____
 Suite/Apt. #: _____ City: _____ State: _____ Zip: _____
 Phone #: _____ Email: _____

Other Important Information

PA Contractor #: _____ EIN #: _____
 How did you hear about us? _____ Website: _____

Check mark the trades you offer:

- | | | |
|---|---|---|
| <input type="checkbox"/> Drawings and Engineering | <input type="checkbox"/> Windows and Skylights | <input type="checkbox"/> Ceiling |
| <input type="checkbox"/> Fencing and Barriers | <input type="checkbox"/> Storefront Glass and Doors | <input type="checkbox"/> Concrete Slabs and Leveling |
| <input type="checkbox"/> Abatement | <input type="checkbox"/> Exterior Doors | <input type="checkbox"/> Stamped Concrete |
| <input type="checkbox"/> Equipment Rental | <input type="checkbox"/> Siding | <input type="checkbox"/> Fireplaces |
| <input type="checkbox"/> Storage Unit Rental | <input type="checkbox"/> Gutters and Downspouts | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Fire and Security Alarms | <input type="checkbox"/> Flooring |
| <input type="checkbox"/> Excavation and Trenching | <input type="checkbox"/> Data | <input type="checkbox"/> Cabinets and Cabinet Install |
| <input type="checkbox"/> Backfill and Grading | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Decking |
| <input type="checkbox"/> Footers and Foundation | <input type="checkbox"/> HVAC and RTUs | <input type="checkbox"/> Pavers |
| <input type="checkbox"/> Block | <input type="checkbox"/> Electrical | <input type="checkbox"/> Paving |
| <input type="checkbox"/> Septic, Sewer and Well | <input type="checkbox"/> Interior Trim and Door | <input type="checkbox"/> Grading and Landscaping |
| <input type="checkbox"/> Framing, Beams and Trusses | <input type="checkbox"/> Paint | <input type="checkbox"/> Power Washing |
| <input type="checkbox"/> Structural Steel | <input type="checkbox"/> Insulation | <input type="checkbox"/> Commercial Cleaning |
| <input type="checkbox"/> Roofing | <input type="checkbox"/> Drywall Hang and Finish | <input type="checkbox"/> Dumpsters |

Other: _____ Do you supply your own materials?: _____

Payment Procedure To receive your payment in a timely manner, please adhere to the following:

1. Text or email all quotes and invoices to quality@blmconstruction.net.
2. Quotes and invoices must include: the current date, all work to be performed (broken down by material and labor with separate pricing), the BLM job number, and duration of work in days.
3. Quotes must be submitted prior to starting work.
4. To be paid for work not on the original scope, a change order will need to be submitted and approved prior to work.
5. Payments are only made on completed work that is approved by the job manager and customer.
6. Invoices are typically paid within 14 days of receipt for approved work and via direct deposit only.
7. You are responsible for keeping a clean job site. BLM will assess a cleaning fee if the job site is not clean.
8. Please submit your invoice in a timely manner. Invoices received after 60 days of completion of work will not be paid.

I have read and agreed to the BLM Construction Handbook and payment procedure outlined above.

Print Name: _____ Sign Name: _____ Date: _____

Request for Taxpayer Identification Number and Certification

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

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <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"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	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.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

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

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 for Part II, later.

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.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they