State of Rhode Island and Providence Plantations
Department of Administration
Division of Purchases

RIVIP BIDDER CERTIFICATION COVER FORM

SECTION 1 - BIDDER INFORMATION

Bidder must be registered as a vendor on the RIVIP system at www.purchase.ri.gov to submit a bid proposal.

Solicitation Number: 7550588A1
Solicitation Title: FOGARTY SCHOOL OF NURSING LANDSCAPING - RI COLLEGE ADDENDUM #1 (3 PGS & ZIP FILE)
Bid Proposal Submission Deadline Date & Time: 6/14/2016 10:00 AM
RIVIP Vendor ID #: 5157
Bidder Name: Yard Works Inc.
Address: 1309 Warwick Ave.
Warwick, RI 02888 USA
Telephone: (401) 463-9133
Fax: (401) 463-3104
Contact Name: Brian Byrnes
Contact Title: Supervisor
Contact Email: bbyrnes@yardworksinc.com

SECTION 2 - DISCLOSURES

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below.

\( \checkmark \) 1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate, has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.

\( \checkmark \) 2. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate, has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.

\( \checkmark \) 3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate, has been fined more than $5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below.

\( \checkmark \) 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasi-public
corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or constitution of this state.

Disclosure details (continue on additional sheet if necessary):

KEVIN J FOX 1309 WARWICK AVE WARWICK RI 02886 33% PRES/TREAS
MICHAEL P FOX 1309 WARWICK AVE WARWICK RI 02886 33% VP
JOSEPH A FOX 1309 WARWICK AVE WARWICK RI 02886 33%

SECTION 3 - OWNERSHIP DISCLOSURE

Bidders must provide all relevant information. Bid proposals submitted without a complete response may be deemed nonresponsive.

If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other owners that hold at least 10% of the record or beneficial equity interests of the Bidder; otherwise, complete ownership disclosure is required.

List each officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parent company and the ultimate parent company of the bidder.

SECTION 4 - CERTIFICATIONS

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No), and if "No," provide details below.

THE BIDDER CERTIFIES THAT:

Y 1. The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to this solicitation.


Y 2. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.

Y 3. The Bidder will maintain all required insurance during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.

Y 4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in this Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud.

Y 5. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other
remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.

6. This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion, conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.

7. The Bidder: (i) is not identified on the General Treasurer’s list created pursuant to R.I. Gen. Laws § 37-2.5-3 as a person or entity engaging in investment activities in Iran described in § 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.

8. The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.

Certification details (continue on additional sheet if necessary):

______________________________

______________________________

______________________________

______________________________

______________________________

Submission by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the State of Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation and the bid proposal. The Bidder certifies that: (1) the Bidder has reviewed this solicitation and agrees to comply with its terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted in the bid proposal (including this Bidder Certification Cover Form) is accurate and complete. The Bidder acknowledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any contract awarded to the Bidder pursuant to this solicitation and the bid proposal. The person signing below represents, under penalty of perjury, that he or she is fully informed regarding the preparation and contents of this bid proposal and has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

BIDDER

Date: 6/14/16

KEVIN J. FOX

Name of Bidder

Signature in ink

KEVIN J. FOX -- PRESIDENT

Printed name and title of person signing on behalf of Bidder
Solicitation #: 7550588
Solicitation Title: Rhode Island College – Fogarty School of Nursing Landscaping

BID FORM

To: The State of Rhode Island Department of Administration
   Division of Purchases, 2nd Floor
   One Capitol Hill, Providence, RI 02908-5855

Bidder: YARD WORKS INC.

Legal name of entity

1309 WARMUIG AVE. WARWICK RI 02888
Address (street/city/state/zip)

CHRISTOPHER M SEBER YARDWORKS.CHRIS@GMAIL.COM
Contact name Contact email

401-463-9133 401-491-3806
Contact telephone Contact fax

1. BASE BID PRICE

The Bidder submits this bid proposal to perform all of the work (including labor and materials) described in the solicitation for this Base Bid Price (including the costs for all Allowances, Bonds, and Addenda):

$ 40,800.00
(base bid price in figures printed electronically, typed, or handwritten legibly in ink)

FORTY THOUSAND EIGHT HUNDRED
(base bid price in words printed electronically, typed, or handwritten legibly in ink)

Allowances

The Base Bid Price includes the costs for the following Allowances:

1. Allowance 1: Provide and Install Drip Irrigation System $3,500

Bonds

The Base Bid Price includes the costs for all Bid and Payment and Performance Bonds required by the solicitation.
Addenda

The Bidder has examined the entire solicitation (including the following Addenda), and the Base Bid Price includes the costs of any modifications required by the Addenda.

All Addenda must be acknowledged.

Addendum No. 1 dated: 6/3/16
Addendum No. 2 dated:
Addendum No. 3 dated:
Addendum No. 4 dated:

2. ALTERNATES (Additions/Subtractions to Base Bid Price)

The Bidder offers to: (i) perform the work described in these Alternates as selected by the State in the order of priority specified below, based on the availability of funds and the best interest of the State; and (ii) increase or reduce the Base Bid Price by the amount set forth below for each Alternate selected. (Check "Add" or "Subtract")

Alternate 1

Base Bid: Work as indicated on drawings.
Alternate: Landscaping north of the parking lot (see drawing L-100)

$8,300.00
(amount in figures printed electronically, typed, or handwritten legibly in ink)
EIGHT THOUSAND THREE HUNDRED
(amount in words printed electronically, typed, or handwritten legibly in ink)

Add: ✓ Subtract: ___

Alternate 2

Base Bid: Work as indicated on drawings.
Alternate: Landscaping in parking lot (see drawing L-100)

$6,400.00
(amount in figures printed electronically, typed, or handwritten legibly in ink)
SIXTY FOUR HUNDRED
(amount in words printed electronically, typed, or handwritten legibly in ink)

Add: ✓ Subtract: ___
Alternate 3

Base Bid: Work as indicated on drawings.
Alternate: Landscaping north of building (see drawing L-100)

$ 7,700

(amount in figures printed electronically, typed, or handwritten legibly in ink)

Seventeen Thousand Seven Hundred

(amount in words printed electronically, typed, or handwritten legibly in ink)

3. UNIT PRICES
The Bidder submits these predetermined Unit Prices as the basis for any change orders approved in advance by the State. These Unit Prices include all costs, including labor, materials, services, regulatory compliance, overhead, and profit.

Not Used.

4. CONTRACT TIME
The Bidder offers to perform the work in accordance with the timeline specified below:

- Substantial completion: September 30, 2016
- Final completion: October 15, 2016

5. LIQUIDATED DAMAGES
The successful bidder awarded a contract pursuant to this solicitation shall be liable for and pay the State, as liquidated damages and not as a penalty, the following amount for each calendar day of delay beyond the date for substantial completion, as determined in the sole discretion of the State:

$250.00 per day

Two Hundred Fifty Dollars per Calendar Day
Solicitation #: 7550588
Solicitation Title: Rhode Island College – Fogarty School of Nursing Landscaping

This bid proposal is irrevocable for 60 days from the bid proposal submission deadline.

If the Bidder is determined to be the successful bidder pursuant to this solicitation, the Bidder will promptly: (i) comply with each of the requirements of the Tentative Letter of Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

The person signing below certifies that he or she has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

**BIDDER**

Date: 6/14/16

YARD WORKS INC

Name of Bidder

[Signature in ink]

KEVIN J. FOX, PRESIDENT

Printed name and title of person signing on behalf of Bidder

# 5857

Bidder’s Contractor Registration Number
13. Comply with all applicable provisions of RIGL §37-13-1, et. seq;

Any questions or concerns regarding this CONTRACT ADDENDUM should be addressed to the contractor or subcontractor's attorney. Additional Prevailing Wage information may be obtained from the Department of Labor and Training at www.dlt.ri.gov/pw.

CERTIFICATION

I hereby certify that I have reviewed this CONTRACT ADDENDUM and understand my obligations as stated above.

By: [Signature]
Title: PRESIDENT

Subscribed and sworn before me this [date] day of [month], 2014

[Notary Public]
My commission expires: 5/12/2020

An Equal Opportunity Employer/Program. Auxiliary aids and services are available upon request to individuals with disabilities.
TTY via RI Relay 711
THE SERVICE INSURANCE COMPANY, INC.
80 Main Street, Suite 330
West Orange, New Jersey 07052
973-731-7650 (P) 973-731-7889 (F)

BOND TERM: SIXTY DAYS FROM BID DATE
FINAL BOND AMOUNT: 400,000.00

BOND NO. 1170RI

BID BOND

KNOW ALL MEN BY THESE PRESENTS, that we YARD WORKS, INC., 1309 WARWICK AVE., WARWICK, RI 02888 called the Principal, and THE SERVICE INSURANCE COMPANY, INC., 80 MAIN STREET, SUITE 330, WEST ORANGE, NEW JERSEY 07052, a corporation duly organized under the laws of the State of New Jersey as Surety, and licensed to do business in the States of New Jersey, New York, Pennsylvania, Delaware, Connecticut, New Hampshire, Rhode Island, Massachusetts, Maryland, and Virginia hereinafter called the Surety, are held and firmly bound unto STATE OF RHODE ISLAND, DEPT. OF ADMINISTRATION, DIV. OF PURCHASING, ONE CAITOL HILL, PROVIDENCE, RI 02908 herein after called the Obligee, in the sum 5% of amount bid not to exceed TWENTY THOUSAND DOLLARS AND 00/100 CENTS.

(5% of amount bid not to exceed $20,000.00)

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents. WHEREAS, the Principal has submitted a bond for the RHODE ISLAND COLLEGE - FOGARTY SCHOOL OF NURSING - LANDSCAPING, SOLICITATION #7550588

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and shall enter into a Contract with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the penalty specified in said bid, then this obligation shall be null and void, otherwise to remain in full force and effect.

This bond has been furnished to comply with the statutory or other legal requirements in the location where the construction is to be performed, any provisions in this Bond conflicting with said statutory or legal requirements shall be deemed deleted here from the provisions. All conforming requirements shall be deemed incorporated herein. The intent is that this Bond shall be construed to conform with the requirements of said bid.

CONSENT OF SURETY

KNOW ALL MEN BY THESE PRESENTS, THAT THE SERVICE INSURANCE COMPANY, INC., A CORPORATION, ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF NEW JERSEY AND LICENSED TO DO BUSINESS IN THE STATES OF NEW JERSEY, NEW YORK, PENNSYLVANIA, DELAWARE, CONNECTICUT, NEW HAMPSHIRE RHODE ISLAND AND MARYLAND, CERTIFIES AND AGREES, THAT IF ABOVE CONTRACT IS AWARDED TO YARD WORKS, INC., 1309 WARWICK AVE., WARWICK, RI 02888 THE UNDERSIGNED WILL EXECUTE ALL BONDS AS REQUIRED BY THE CONTRACT DOCUMENTS AND WILL BECOME SURETY IN THE FULL AMOUNTS SET FORTH IN THE CONTRACT FOR THE FAITHFUL PERFORMANCE OF ALL OBLIGATIONS OF THE CONTRACTOR.

SIGNED AND SEALED THIS 14TH of JUNE, 2016.

WITNESS

SURETY EMBOSSED CORPORATE SEAL MUST APPEAR ON BOND FORM AND POWER OF ATTORNEY

YARD WORKS, INC., 1309 WARWICK AVE., WARWICK, RI 02888

PRINCIPAL Kevin J. Fox, President

THE SERVICE INSURANCE COMPANY, INC.

ATTORNEY-IN-FACT Marcia S. Dacey

WITNESS Michael T. Dacey
THE SERVICE INSURANCE COMPANY, INC.
80 Main Street, Suite 330
West Orange, New Jersey 07052
973-731-7650 (P) 973-731-7889 (F)

CONSENT OF SURETY

OBLIGEE: STATE OF RHODE ISLAND, DEPT. OF ADMINISTRATION, DIV. OF PURCHASING, ONE CAITOL HILL, PROVIDENCE, RI 02908

PRINCIPAL: YARD WORKS, INC., 1309 WARWICK AVE., WARWICK, RI 02888

PROJECT: RHODE ISLAND COLLEGE - FOGARTY SCHOOL OF NURSING - LANDSCAPING, SOLICITATION #7550588

CONSENT #: 1170Ri

TERM: SIXTY DAYS FROM BID DATE

FINAL BOND AMOUNT: 400,000.00

The undersigned Surety, THE SERVICE INSURANCE COMPANY, INC. consents and agrees that if the contract, for which estimate and proposal is made, be awarded to the principal or persons submitted in same as contracted, it will become bound as surety and guarantor and issue such bonds as required for its faithful performance, in an amount equal to one hundred percent (100%) of the contract price.

In witness thereof, said Surety, THE SERVICE INSURANCE COMPANY, INC. has caused these presents to be signed and attested by a duly authorized officer and its corporate seal to be hereto affixed this 14th day of JUNE, 2016.

SURETY EMBOSSED CORPORATE SEAL MUST APPEAR ON BOND FORM AND POWER OF ATTORNEY

YARD WORKS, INC., 1309 WARWICK AVE.,
WARWICK, RI 02888

PRINCIPAL Kevin J. Fox, President

THE SERVICE INSURANCE COMPANY, INC.

ATTORNEY-IN-FACT Marcia S. Dacey

WITNESS Michael T. Dacey
KNOW ALL MEN BY THESE PRESENTS: That THE SERVICE INSURANCE COMPANY, INC., 80 Main Street #330, West Orange, NJ 07052, a corporation of the State of New Jersey, pursuant to authority granted by Article VIII, Section 7 of the By-Laws of said Company, which reads as follows: "CONTRACTIONS. The Board of Directors may authorize any officers, to execute any surety bond instrument in the name of and on behalf of the corporation, and such authority may be general or confined to specific instances."

Does hereby nominate, constitute and appoint Glen T. Burger and James S. Burger, its true and lawful agents and Attorney(s)-in-Fact, to make, execute, seal and deliver for, and on its behalf as surety, and its act and deed: any and all bond undertakings, no one bond to exceed an aggregated penal sum liability of $2,000,000.00 (Two Million Dollars).

Does hereby nominate, constitute and appoint MICHAEL T. DACEY, MARCIA S. DACEY, DINA C. HOPKINS of DACEY INSURANCE Insurance Agency as its true and lawful agents ("Outside Agents") and Attorney(s)-in-Fact to make, execute and deliver a Consent of Surety on behalf of the Company to any Obligee for a payment and/or performance bond not to exceed an aggregated penal sum liability of $2,000,000 (Two Million Dollars).

Does hereby nominate, constitute and appoint said Outside Agents as Limited Attorney in Fact, to make, execute, seal and deliver for and on its behalf (i) bid bonds not to exceed $100,000 in face amount and (ii) any and all other bond undertakings not to exceed $1,000,000 in aggregate penal sum liability. Said Outside Agents shall obtain prior approval confirmed in writing from the Company with a bond number provided by the Company's home office prior to issuing any bonds. Said Outside Agents by executing the attached bond, hereby represent and warrant under oath that the Company has granted him/her prior approval and furnished the bond number for the attached bond, which has been logged and recorded at the Company's home office. The Company shall not honor, honor or pay any claims for unauthorized bonds, and the Obligee may confirm the validity of the attached bond on receipt by contacting the Company in writing at 973-731-7899 (fax) or jburger@serviceinsurancecompany.com.

IN WITNESS WHEREOF, the said Treasurer and President have hereunto subscribed their names and affixed the Corporate Seal of the said The Service Insurance Company, Inc., this 4th day of November, A.D. 2013

THE SERVICE INSURANCE COMPANY, INC.

[Signature]

GLEN T. BURGER, TREASURER

STATE OF NEW JERSEY )
CITY OF WEST ORANGE ) SS

On this 4th day of November, A.D. 2013, before the subscribed, a Notary Public of the State of New Jersey, duly commissioned and qualified, came the above named Treasurer and President of The Service Insurance Company, Inc., to me personally known to be the individuals and officers described in and who executed the preceding instrument, and they each acknowledge the execution of the same, and being by me duly sworn severally and each for himself deposes the saith, that they are the said officers of the Company aforesaid, and that the seal is affixed to the preceding instruments, is the Corporate Seal of said Company, and that the Corporate Seal and their signatures as such officers were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

[Signature]

MARIA B. CERQUEIRA
ID #3660557
NOTARY PUBLIC
STATE OF NEW JERSEY
My Commission Expires June 04, 2017

CERTIFICATE

I, the undersigned, President of The Service Insurance Company, Inc., The Company, do hereby certify that the original Power of Attorney in which the foregoing is full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the President who executed the said Power of Attorney was specially authorized by the Board of Directors to appoint any Attorney in Fact as provided in Article VIII, Section 7, of the By-Laws of The Service Insurance Company, Inc.

This Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of The Service Insurance Company, Inc.

Resolved: "That the facsimile or mechanically reproduced signature of the Company President, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed."

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the Corporate Seal of the said Company, this 14th day of June 2016.

[Signature]

JAMES S. BURGER, PRESIDENT
STATE OF RHODE ISLAND
FORM W-9 PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A $50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpayer Identification Number (T.I.N.)
Enter your taxpayer identification number in the appropriate box. For most individuals, this is your social security number.

Social Security No. (SSN)  
Employer ID No. (EIN) 03-044255

NAME YARD WORKS INC.

ADDRESS 1309 WARWICK AVE.

CITY, STATE AND ZIP CODE WARWICK RI 02886

PAYMENT REMITTANCE ADDRESS, IF DIFFERENT FROM THE ADDRESS ABOVE

ADDRESS

CITY, STATE AND ZIP CODE

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 either: (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.
(3) I am a U.S. citizen or other U.S. person (as defined by the IRS).

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.

Please sign here and provide title, date and telephone number:

SIGNATURE  
TITLE PRESIDENT  
DATE 6/14/16  
TEL NO. 401-463-9133

BUSINESS DESIGNATION:

Please Check One:  
Individual ☐  
Corporation ☑  
Trust/Estate ☐  
Government/Nonprofit Corporation ☐  
Partnership ☐  
Medical Services Corporation ☐  
Legal Services Corporation ☐  
 LLC Tax Classification:  
Single Member (Individual) ☐  
Partnership ☐  
Corporation ☑

TIPS:
NAME: Be sure to enter your full and correct legal name as shown on your income tax return for the SSN or EIN provided.
ADDRESS, CITY, STATE AND ZIP CODE: If you operate a business at more than one location, adhere to the following:
1) Same EIN with more than one location – attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed.
2) Different EIN for each different location -- submit a completed W-9 form for each EIN and location. (One year-end tax information return will be reported for each EIN and remittance address.)

Mail Completed Form To:
Supplier Coordinator
Purchasing Department
One Capitol Hill, 2nd Floor
Providence RI 02906

Or Email To: dos.pursuppliercoordinator@purchasing.ri.gov

For State Use Only:
IRS _____ RI SOS _____ FED _____ Other _____
RI Supplier # ________ Approved __________
Date Entered __________ Entered By __________

RIFANS Supplier Registration Package  
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