

NEW VENDOR INPUT

District Name: _____ Project / Business Unit: _____

- Add Vendor
- Change Data
- Employee

Vendor Code
(For use by Lincoln Accounting Only)

Does this vendor work on-site? _____
Yes No

If Yes, Proof of **current** general liability and workers compensation **must** be attached!

Vendor Information

Vendor Name

Payment Address (This may differ from the address on W-9, verify payment address with vendor)

Payment Address

City, _____ State. _____ Zip Code _____

Phone Number _____ Fax Number _____ Email Address _____

Does Vendor have a California Contractors License? _____
YES NO N/A

If Yes, what is the License number? (Note: required for some vendors) _____

SECTION B 1099 Reporting Information

Tax Name (This is the name that matches the Tax ID number listed on the W-9)

Tax ID Number or SSN if Applicable

- Exempt (Corporations, Merchandise Only, Petty Cash Custodians, Employee Reimbursements)
- Non-Exempt (All Other Vendors are NON-EXEMPT)

SECTION C Small Business Classification

Note: Leave this section blank if your business DOES NOT provide labor on-site for any of our properties
For help on locating your NAICS (North American Industry Classification System) code, go to <http://vendor.lppv.com>

2002 NAICS Code Number: _____ Qualified for Small Business: _____
YES NO

Category or Industry: _____

Print Vendor Representative Name: _____

Signature of Vendor Representative: _____

SECTION D Requested By

Requester: _____

SECTION E Approval

Regional Maintenance Director: _____

Regional Property Manager: _____

Vice President: _____

Project Accountant: _____

