

Town of Alto

P.O. Box 215 Alto, Georgia 30510 Phone: 706-778-8035 | Fax: 706-778-3357

To Whom It May Concern:		
The Internal Revenue Code Section 6041A requires recipidentification numbers to payers required to report such payer order for us to properly update our records for the purpose of furnish the following information. I am enclosing the follow and for compliance with all new state and federal laws. Please	f issuing accurating forms that I	te 1099's, I ask that you need updated for our record
Is your business or organization a corporation?	Yes	No
The second secon		
Is your business or organization a corporation?	105	* 14

Please note on the W-9 Form the area concerning penalties and backup withholding. I ask that you read these sections and see whether they are applicable. Each of the enclosed forms must be completed to the best of your ability and returned to the City Hall as soon as possible. If you have a current business / occupational license and a photo ID, please include a copy of each with the return of these forms. If applicable, I also need a copy of your certificate of insurance.

I appreciate your prompt attention and response to this matter.

Sincerely,

Lisa K. Turner

Lioa K. Turner

CFO

Enclosures: Contractor Affidavit /Agreement Georgia Security & Immigration Compliance Act

CONTRACTOR AFFIDAVIT AND AGREEMENT

The Town of Alto and Contractor agree that compliance with the requirements of O.C.G.A. 13-10-91 and Rule 300-10-1-.02 of the Rules of the Georgia Department of Labor are conditions of this Agreement for the physical performance of services.

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. 13-10-91, stating affirmatively that the individual, firm, or corporation which is contracting with the Town of Alto has registered with and is participating in the federal work authorization program known as "E-Verify", web address https://e-verify.uscis.gov/enroll operated by the United States Citizenship and Immigration Services Bureau of the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the Town of Alto, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the Town of Alto at the time the subcontractor(s) is retained to perform such service.

E-Verify Employment Eligibility Verification User Identification Number	Date of Authorization
Name of Contractor	
Signature of Authorized Officer or Agent of Contractor	
Title of Authorized Officer or Agent of Contractor	
Printed Name of Authorized Officer or Agent	
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE DAY OF, 20	
Notary Public	

My Commission Expires:

* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV / Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

Senate Bill 529 is the "Georgia Security and Immigration Compliance Act" of 2006 (Act 457). Section 2 of SB 529 enacted new work eligibility verification requirements that apply to Georgia's public employers, and the contractors and subcontractors of Georgia's public employers. Under Section 2 of SB 529, "Public Employers, Their Contractors and Subcontractors are required to Verify New Employee Work Eligibility through a Federal Work Authorization Program".

The new rules designate the "Employment Eligibility Verification (EEV) / Basic Pilot Progam" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security as the electronic federal work authorization program to be utilized for these purposes. The EEV/Basic Pilot Program can be accessed at https://e-verify.uscis.gov/enroll.

By executing the attached Contractor Affidavit, Contractor verifies its compliance with O.C.G.A. 13-1091 stating affirmatively that the individual, firm or corporation which is contracting with the Town of Alto has registered and is participating in this federal work authorization program in accordance with the applicability provisions and deadlines established in this Statute.

Contractor further agrees that should it employ or contract with any Sub-Contractor(s) for the physical performance of services pursuant to the contract with the Town of Alto, Contractor will secure from the Sub-Contractor(s) verification of compliance with O.C.G.A. 13-10-9 Ion a Sub-Contractor Affidavit and shall provide a copy of each such verification to the Town of Alto at the time the Sub-Contractor(s) is retained to perform such services.

Please Complete the Attached Affidavit and Return to: ltmner@townofaltoga.org mail to:

Attention: Lisa K. Turner, CFO Town of Alto P.O. Box 215 Alto, GA 30510-0215

(Rev. November 2017) Department of the Treasury Internal Revenue Service

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.

	1 Nar	me (as shown on your income tax return). Name is required on this	line; do not l	leave this line blank.										
	2 Bus	siness name/disregarded entity name, if different from above		We this the same										
s. ns on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.						ins	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
		Individual/sole proprietor or C Corporation S Corporation S Corporation	(81)(81) = 11	Partnership	Trust	/estate		Exempt payee code (if any)						
Print or type. Specific Instructions on page	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.													
Ğ.	П	Other (see instructions)			Deminato	r'e ner	1,555	A CONTRACTOR OF THE CONTRACTOR						
See Spe		ddress (number, street, and apt. or suite no.) See instructions.			Hequeste	rsnai	ne anu	and address (optional)						
03	6 Ci	ty, state, and ZIP code												
	7 Lis	st account number(s) here (optional)												
Pa	111	Taxpayer Identification Number (TIN)				Carla	Langue	ione more	har			_		
A COLUMN 11 41	THE REAL PROPERTY.	me milet market market	the name g	iven on line 1 to av		Socia	secur	ity nun	Toer	7 [_	_	-	
backup withholding. For individuals, this is generally your the instructions for Part I later. For other								-		-				
entiti	es, it i	ien, sole proprietor, or disregarded entity, see the instituction is your employer identification number (EIN). If you do not	have a num	iber, see How to ge	era L	or		-	-	-				
						Empl	oyer id	entifica	tion	numb	er			
Note	: If the	e account is in more than one name, see the instructions f	or line 1. Al	so see virial ivaine	1	T		T	T	T		T	7	
Num	ber To	o Give the Requester for guidelines on whose number to e	itter.											
A 40 C (10 C)	rt II	Certification												
Und	er per	nalties of perjury, I certify that: The shown on this form is my correct taxpayer identification is the shown on this form is my correct taxpayer identification.	ion number	(or I am waiting fo	r a numbe	er to b	e issu	ed to	ne);	and				
2.18	am no	mber shown on this form is my correct taxpayer identificat it subject to backup withholding because: (a) I am exempt (IRS) that I am subject to backup withholding as a result of per subject to backup withholding; and	from backu of a failure t	up withholding, or (o report all interest	b) I have i t or divide	not be inds, i	een not or (c) ti	tifled the IRS	has	notifi	ed me	that	l am	
		(defined below): and				T								
3. I	bo EA	U.S. citizen or other U.S. person (defined below) and TCA code(s) entered on this form (if any) indicating that I a	m exempt	from FATCA report	ting is cor	rect.	n e aera		nakı	in wit	nholdi	na hr	cause	
Cer	tificat	TCA code(s) entered on this form (if any) indicating that I a ion instructions. You must cross out item 2 above if you hav failed to report all interest and dividends on your tax return. F in or abandonment of secured property, cancellation of debt, interest and dividends, you are not required to sign the certi	or real estat	e transactions, item	2 does no	ot app								
Sig	jn re	Signature of U.S. person ▶			Date ►				Postous					
G	ene	eral Instructions	Par in	• Form 1099-DIV (funds)										
Section references are to the Internal Revenue Code unless otherwise noted.				Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)										
Future developments. For the latest information about developments		ents d	Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) Form 1099-S (proceeds from real estate transactions)											
P	after they were published, go to www.irs.gov/FormW9. Purpose of Form			 Form 1099-5 (proceeds from the form 1099-K (merchant card and third party network transactions) Form 1098 (home mortgage interest), 1098-E (student loan interest), 										
An	indivi	dual or entity (Form W-9 requester) who is required to file		1098-T (tuition)										
ide	entification number (TIN) which may be your social security number (ITIN), adoption			Form 1099-C (canceled debt) Form 1099-A (acquisition or abandonment of secured property) Help a resident							nt			
tax	payer identification number (ATIV), of employer paid to you, or other			Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.										
-	tauna	report on an information return. Examples of information return. Examples of information return. Examples of information return. Examples of information return.	THE STATE OF THE S	If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,										

later.

returns include, but are not limited to, the following. • Form 1099-INT (interest earned or paid)