Titus County Auditor

100 W. 1s' Street, Suite 106, Mt Pleasant, Texas 75455 (903) 572-8101 1: auditor@co.titus.tx.us

Dear Vendor:

Welcome to Titus County!

Attached please find information and forms that must be completed prior to doing business with Titus County. Please note vendors must submit a completed and signed W-9 and a Certificate of Insurance. Vendors should also visit the Titus County Webpage regularly for bid opportunities, information, and update. Please click on the purchasing link under County Information on the lower left side of the homepage at www.co.titus.tx.us. I have also listed some helpful hints below to aid you in doing business with Titus County. Please contact the auditors office via email or phone should you have any questions or require assistance in completing this application. The purchasing contact is Ms. Linda Marshall. You can reach her at the above email and phone number.

Thank you for your interest in doing business with Titus County; we look forward to working with youl

Nanette Wilabay, Titus County Auditor Titus County, Texas

Helpful Hints:

Vendors Should Always:

Request and obtain a Purchase Order Number from the County prior to delivering any items or performing services.

Reference the Purchase Order Number on the invoice.

Obtain a legible signature, the name and telephone number from the individual receiving the goods or services on behalf of the ordering department.

Vendors should NOT:

Accept orders without a Purchase Order Number. These orders are not the responsibility of Titus County. Modify orders unless the Auditor's Office has issued an amendment to the Purchase Order. Invoice for items that have not been delivered.

Titus County Auditor Department
100 W. 1st Street, Suite 106, Mt Pleasant, Texas 75455
Phone (903) 572-8101 ~ Fax (903) 572-1467 ~ auditor@co.titus.tx.us

VENDOR REGISTRATION REQUEST FORM

Return this form with your application

To:	Titus Count Fax: (9			
		ditor@co.titus.tx.u	<u>18</u>	
Requ	ested by:			·
Phon	ie		E-mail	
Nam	e of Vendor (As reported on Federal ta	x return)	
Cont	act Name		ئىرىنى سادە م يازىنى ئاسىدەن بايادەرى <u>بىرى يىرىسى</u>	
Billin	ng Address		City/State/Zip	
Telep	ohone	Facsimile	E-mail	
A	COMPLETI		W-9 AND CERTIF	ICATE OF INSURANCE

Titus County, Texas 100 W. 1st Street, Suite 106

Mt Pleasant, Texas 75455
Office: 903-572-8101 Fax: 903-572-1467

Office: 903-572-8101 Fax: 903-572-1407

http://www.co.titus.tx.us/ Email: auditor@co.titus.tx.us

VENDOR INFORMATION - TYPE OF WORK OFFERED:

Return this form with your application

2.	Please note that completion of this packet does not g packet is an opportunity for you to notify elected off	guarantee that you will be selected. Completion of this icials of the type of work you are capable of performing.
2.	packet is an opportunity for you to notify elected off	icials of the type of work you are capable of performing.
3.	packet is an opportunity for you to notify elected off. If you would like to include a rate sheet with the hou	icials of the type of work you are capable of performing.

Conflict of Interests

Beginning January 1, 2006, a new state law (Chapter 176 of the Texas Local Government Code) requires the filing of conflict-of-interest questionnaires by certain individuals and businesses.

The questionnaire requires disclosure of certain business and gift giving relationships, if any, the filers may have with commissioner's court members, the purchasing agent, and any other elected/appointed officials.

The new law applies to:

- businesses and individuals who contract with the County,
- businesses and individuals who seek to contract with the County, (regardless of whether a bidder is awarded the contract), and
- Agents who represent such businesses in their business dealings with the County.

If you have any questions about compliance, please consult your own legal counsel. Compliance is the individual responsibility of each individual, business, and agent who is subject to the law's filing requirement. A copy of this form is attached.

If you are required to file a Conflict-of-Interest Questionnaire, you should file with the county clerk by mailing it to the county clerk's office at:

Titus County Clerk 100 W 1st Street, Suite 204 Mt Pleasant, Texas 75455

Phone: 903-577-6796
Fax: 903-572-5078

FORM CIQ CONFLICT OF INTEREST QUESTIONNAIRE For vendor or other person doing business with local governmental entity OFFICE USE ONLY This questionnaire reflects changes made to the law by H.B. 1491, 88th Leg., Regular Session. This questionnaire is being filed in accordance with Chapter 176, Local Government Code Date Received by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a). By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code. A person commits an offense if the person knowingly violates Section 176.008, Local Government Code. An offense under this section is a Class C misdemeanor. Name of person who has a business relationship with local governmental entity. Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.) Name of local government officer with whom filer has employment or business relationship. Name of Officer This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176,001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary. A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire? Yes B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity? Yes C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more? Yes D. Describe each employment or business relationship with the local government officer named in this section. Date Signature of person doing business with the governmental entity

Form W-9 (Rev. March 2024) 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.

Befor	e ye	bu begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.									
	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.)										
Print or type. See Specific Instructions on page 3.	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. Individual/sole proprietor C corporation S corporation Partnership Trust/estate 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. Other (see instructions) 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						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) (Applies to accounts maintained outside the United States.)				
	5	this box if you have any foreign partners, owners, or beneficiaries. See instructions				ınd ad	dress (o	ptiona	ıl)		
	6 City, state, and ZIP code										
		List account number(s) here (optional)									
Par	t I	Taxpayer Identification Number (TIN)									
backu reside	p w nt a s, it	r TIN in the appropriate box. The TIN provided must match the name given on line 1 to av ithholding. For individuals, this is generally your social security number (SSN). However, f lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	or a	or]-	number]-			
Nada.	IE TL	a account is in more than one name accepts instructions for line 1. See size What Name	and	Empi	oyer	r identification number					
		the account is in more than one name, see the instructions for line 1. See also What Name to Give the Requester for guidelines on whose number to enter.	and		-						
Part	Ш	Certification									
1. The 2. I am Sen	nui no vice	nalties of perjury, I certify that: The shown on this form is my correct taxpayer identification number (or I am waiting for t subject to backup withholding because (a) I am exempt from backup withholding, or (b) (IRS) that I am subject to backup withholding as a result of a failure to report all interest of the subject to backup withholding; and	I have r	not bee	en no	tified	by the	Inten	nal Reve ed me t	enue hat I am	
3. I am	al	J.S. citizen or other U.S. person (defined below); and									
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	g is cor	rect.							
becaus acquis	se y	on instructions. You must cross out item 2 above if you have been notified by the IRS that you have failed to report all interest and dividends on your tax return. For real estate transaction or abandonment of secured property, cancellation of debt, contributions to an individual retinterest and dividends, you are not required to sign the certification, but you must provide you	ons, item irement	ı 2 doe arrang	s not emen	t apply nt (IRA	y. For n A), and,	nortga gener	age inte ally, pa	rest paid, yments	
Sign Here		Signature of U.S. person	Date								

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