



Mailing Address:  
Palm Beach County Tax Collector  
Finance & Budget  
P.O. Box 3715  
West Palm Beach, FL 33402-3715  
Phone Number: (561)355-6767  
Fax Number: (561)355-3814  
Web Address: [www.pbctax.gov](http://www.pbctax.gov)

FOR TCO USE ONLY

Vendor No. \_\_\_\_\_  
Date Entered \_\_\_\_\_  
Entered By \_\_\_\_\_

## VENDOR REGISTRATION FORM

<input type="checkbox"/> New Application				<input type="checkbox"/> Corporation		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Non-Profit	
<input type="checkbox"/> Revised Application				<input type="checkbox"/> Partnership		<input type="checkbox"/> Individual		<input type="checkbox"/> Other	
<b>Check those that apply to your firm:</b>									
Federal ID Number (Attach completed W-9 Form)					Social Security Number (Attach completed W-9 Form)				
Company Name (must match name to which Federal ID or Social Security Number is assigned)									
Parent Company Name or DBA (if applicable)							Business Hours		
Street Address									
City			State				Zip		
County			Country (if not a USA firm)				Web Address		
Mailing Address									
City				State				Zip	
County				Country (if not a USA firm)					
Business Contact Person									
Phone Number		Toll Free Number		Fax Number		E-mail Address			
Billing Contact Person									
Phone Number		Toll Free Number		Fax Number		E-mail Address			
<b>Licenses and Certifications</b>									
Palm Beach County Business Tax Number _____					Expiration Date _____				
Additional Licenses/Certifications									
Type _____				Number _____					
Issuing Agency _____				Expiration Date _____					
Type _____				Number _____					
Issuing Agency _____				Expiration Date _____					

# PALM BEACH COUNTY TAX COLLECTOR VENDOR REGISTRATION FORM

*ONLY list the types of goods/services directly supplied by your organization.*

1)	4)	7)
2)	5)	8)
3)	6)	9)

List four(4) references to whom you have provided goods/services within the past two(2) years (*include name, address, telephone #*)

Reference 1	Name _____	Phone Number _____
	Address _____	
Reference 2	Name _____	Phone Number _____
	Address _____	
Reference 3	Name _____	Phone Number _____
	Address _____	
Reference 4	Name _____	Phone Number _____
	Address _____	

## Company Officials/Principals

Name _____	Position/Title _____
Name _____	Position/Title _____
Name _____	Position/Title _____
Name _____	Position/Title _____

Company Officials/Principals/Employees who are PBC Tax Collector Employees or related to PBC Tax Collector Employees

Name _____	Name of TCO Employee _____
Position Title _____	Relationship _____
Name _____	Name of TCO Employee _____
Position Title _____	Relationship _____

Attach additional sheet if needed.

*If any of the preceeding information changes, please submit an updated Vendor Registration Form.*

Company Officer's/ Principal's Authorization \_\_\_\_\_

Signature

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Return to:

Tax Collector, Palm Beach County  
Finance & Budget Department  
P.O. Box 3715  
West Palm Beach, FL 33402-3715

**W-9**

**Request for Taxpayer  
Identification Number and Certification**

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

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership  
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ .....  
☐ Other (see instructions) ▶

☐ Exempt  
payee

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

or

Employer identification number

**Note.** If the account is in more than one name, see the chart on page 4 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).

**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 on page 4.

**Sign  
Here**

Signature of  
U.S. person ▶

Date ▶

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,



**ANNE M. GANNON**  
CONSTITUTIONAL TAX COLLECTOR  
*Serving Palm Beach County*

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

**Complete all fields in each section and return with voided check or bank letter**

**Action Requested (check one):**    ☐ INITIAL ENROLLMENT    ☐ \*BANK CHANGE    ☐ CANCEL EFT AUTHORIZATION

### SECTION 1: Vendor Identification (Individual/Entity receiving payment)

VENDOR NAME:

MAILING ADDRESS:

CITY:

STATE:

ZIP CODE:

TAXPAYER IDENTIFICATION NUMBER (EIN or SSN):

VENDOR NUMBER:

CONTACT NAME:

CONTACT PHONE:

CONTACT EMAIL:

### SECTION 2: Banking Information (Voided check or bank letter confirming routing/ account number is required)

BANK NAME:

BANK ADDRESS:

CITY:

STATE:

ZIP CODE:

ACCOUNT NUMBER:

ROUTING NUMBER (9 digits):

ACCOUNT NAME (as shown on bank statement):

ACCOUNT TYPE (check one):

☐ Checking    ☐ Savings

EMAIL ADDRESS FOR ELECTRONIC PAYMENT REMITTANCES:

**\*For Bank Change Only**

**Provide bank account number currently on file with the Tax Collector's Office:**

### SECTION 3: Vendor Authorization

I certify that I am authorized to sign on behalf of the vendor, and that all information provided in this document is correct. I hereby authorize and request the Tax Collector's Office to initiate/change/cancel ACH credit entries to the above bank account. I further authorize the Tax Collector's Office to reverse any payment made to this account in error. This electronic fund transfer authorization is to remain in effect until the Tax Collector's Office receives written notification of cancellation.

SIGNATURE:

PRINTED NAME:

TITLE:

DATE:

**Mail completed EFT authorization form along with voided check or bank letter to:**

Palm Beach County Tax Collector  
Attn: Finance & Budget  
P.O. Box 3715  
West Palm Beach, FL 33402-3715

For questions, please contact:  
Finance & Budget Department  
(561) 355-6836