

INDEPENDENT CONTRACTOR PAYROLL SETUP FORM

1. CONTRACTOR GENERAL INFORMATION

Full Name (Individual or Business Owner)

Phone Number

Business Name / DBA (if applicable)

Email Address

Street Address

Suite / Apt / Unit

City

State

ZIP Code

2. DIRECT DEPOSIT AUTHORIZATION (OPTIONAL)

Please provide direct deposit details if you prefer electronic fund transfer for payment.

Bank Name

Account Type

- ☐ Checking
☐ Savings

Routing Number (9 Digits)

Account Number

3. AUTHORIZATION & SIGNATURE

I hereby authorize the paying entity to initiate credit entries and, if necessary, debit entries and adjustments for any credit entries in error to my account indicated above. This authorization is to remain in full force and effect until the company has received written notification from me of its termination in such time and in such manner as to afford a reasonable opportunity to act on it.

Contractor Signature

Date

Form
W-9

**REQUEST FOR TAXPAYER
IDENTIFICATION NUMBER AND CERTIFICATION**

(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

1. Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2. Business name/disregarded entity name, if different from above

3. Federal tax classification of the person name on line 1. Check only one of the following seven boxes.

- ☐ Individual/sole proprietor or single-member LLC
☐ C Corporation
☐ S Corporation
☐ Partnership
☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) _____

4. Exemptions (codes apply only to certain entities, not individuals; see instructions on IRS Form W-9 website if applicable):

Exempt payee code (if any): _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any): _____

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

6. City, state, and ZIP code

7. 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 generally your social security number (SSN). For other entities, it is your employer identification number (EIN).

Social Security Number (SSN)

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-	

OR

Employer Identification Number (EIN)

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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 in the instructions); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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.

Sign Here **Signature of U.S. Person**

Date
