



CERTIFIED GENERAL CONTRACTORS
THROUGHOUT THE SOUTHEAST US

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Jacksonville, Florida 32257
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Kendale Design/Build General Contractors, LLC. VENDOR REQUEST FORM

Check one: New: _____ Revision: _____

VENDOR ACCOUNT INFORMATION

Company Name		Contact Name/Title	
		E-mail	
Telephone		Fax	
Registered Company Address City, State, ZIP Code		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other	
Billing Address City, State, ZIP Code			
Tax ID #			

VENDOR ACCOUNTS RECEIVABLE

AR Contact		AR E-mail	
AR Telephone			

REQUEST FOR W-9

IRS regulations require that we issue 1099 forms to certain companies and individuals. In order to accurately prepare these forms, we must obtain and maintain Form W-9 Request for Taxpayer Identification Number and Certification from all our vendors. Therefore, in order to ensure our reporting accuracy, please complete this form and provide a copy of your W9 to us within seven days of receipt.

Form W9 can be found at -----> <https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103>

PROOF OF INSURANCE (SUBCONTRACTORS ONLY)

If you are a subcontractor for Kendale Design/Build General Contractors, LLC., we require a copy of your Certificate of Insurance that covers the dates you will be working for us. Please provide a Certificate of Insurance showing Kendale Design/Build General Contractors, LLC. as the certificate holder and additional insured with general liability and workers' compensation coverage.

Coverage amounts should coincide with those of the job contract. If unsure, contact the Project Manager handling the job.

APPROVAL (for office use only)

Form completed/requested by:		Date	
Entered by		Date	

Please send completed forms to- Email: builder@kendale.net OR Fax: 904-388-7646