

**DNA Investments, Inc** dba JCHiggins & Associates  
Real Estate Leasing and Management Since 1982

Date:

TO: **All Payees**

The Internal Revenue Service requires us (under Code, Section 6014A) to obtain certain information from you to meet our Form 1099-Misc filing requirements. The requirement is to withhold 31% from payments to such persons unless we have their correct Federal Taxpayer Identification Number. In order for us to comply with these regulations, we are requesting that you complete the enclosed W-9 form. We are sending this request to you or your business as it appears on our Accounts Payable records.

**It is JCHiggins and Associates policy not to issue a check without a W-9 on file. You will not receive payment until we receive the completed W-9. Even if you are exempt, please complete this form to avoid possible erroneous backup withholding.**

Also enclosed is our form "Contractor/Vendor Registration". This form is needed for Washington State requirements. Please complete and return with Form W-9.

Please complete and return the two enclosed forms. To speed the process, you may fax the two forms to 253-840-3281, Attn: Accounts Payable.

Please notify us of any changes to the Tax ID number or ownership.

Should you have any questions, please call me at 253-841-0111 Ext. 112.

Thank you for your cooperation in providing us with this information.

Ellie Bates  
Accounting

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802 39<sup>th</sup> Avenue SW • Post Office Box 731029 • Puyallup, WA 98373  
253 841-0111 Voice • 253 841-0122 TDD • 253 840-3281 Fax • Deborah@jc-higgins.com

## CONTRACTOR/VENDOR REGISTRATION

Contractor/Vendor: \_\_\_\_\_ . Principal: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone: Day \_\_\_\_\_ . Emergency \_\_\_\_\_

Business Entity: Sole Proprietor \_\_\_\_ . Partnership \_\_\_\_ . Corporation \_\_\_\_ .  
Federal Tax I.D. # \_\_\_\_ - \_\_\_\_\_

State Unified Business Identification Number: \_\_\_\_\_

Liability Carrier: \_\_\_\_\_ .

Local Agent (Name and Phone Number): \_\_\_\_\_ .

### GENERAL CONDITIONS

We at JCHiggins and Associates want our relationship to be mutually satisfactory and profitable. To that end, we think you should know:

1. We are strictly a management company and act only as agent for the Owners of properties we manage. Invoices are to be made out as follows:

Property Number and Name (Furnished by us.)  
c/o DNA Investments, Inc  
Post Office Box 731029  
Puyallup, Washington 98373-0030

2. Invoices received by the 25th will be paid by the 15th of the following month. Although every effort is made to pay all invoices in a timely manner, invoices received after the 25th may not be paid for 50 days. This would only occur if our Owners accounts are unusually short and we have to wait for additional funds.

3. Occasionally, disputes may arise due to mispricing, lost invoices, poor service, non-payment, etc. Contractor/Vendor agrees that any such dispute on one property will not affect service or delivery on another property.

4. We are to receive 30-days written notice of price increases on all "open-end" agreements. Until expiration of that 30-day period all orders received from us will be honored at the existing price schedules.

5. Contractors/Vendors are not to give, or offer to give, anything of value to any employee of JCHiggins and Associates. You agree to report to the management any attempts by an employee to solicit such a gratuity or "kickback."

6. Contractor/Vendor is to carry all insurance required by the State of Washington including: Labor and Industries; State and Federal Unemployment; Workers Compensation.

7. Contractor/Vendor is fully responsible for any liability caused by his work or presence on the property.

8. Contractor/Vendor agrees to repair and replace all property damaged, lost, stolen or destroyed due to his negligence.

9. Contractor/Vendor agrees to clean up and haul away on a daily basis any debris resulting from his work on the property.

10. Contractor/Vendor is fully responsible for the care and safekeeping of any of his tools, equipment, and materials.

11. Contractor/Vendor will comply with all State Safety Guidelines regarding proper use of all required safety equipment.

12. Contractor/Vendor will pay any and all federal, state, and municipal taxes and licenses, for which he may be liable, as a result of this relationship.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Contractor/Vendor

\_\_\_\_\_  
DNA Investments, Inc  
Managing agent for the Owner