6201 Winnetka Avenue, Woodland Hills, CA 9137 Tel: 818-710-2860 / Fax: 818-610-6508 Internal Use Only:

Office of Special Events

Application for Use of College Facilities

	Today's Date:		Event Date:			*For multiple dates, please include a separate list with this application
	<u>Event:</u>				Event Time: 6 W D U W (QG 7LPH
	Organization Name:			4	Amount of ho	urs for Set-up:
	Organization Address: 6WUHHW &LW\ 6WDWH =LS					urs for Wrap:
-	Contact:	<u>Phone:</u>			Anticipated	Number of
	acilities sted:			Anticipated ∀ehic		
n c	f Event:					
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Create Vendor Form

Send this form to: ProcurementVendorMaintenance@email.laccd.edu

GENERAL INFORMATION			OTHER LINKS		WEBSITES FOR VENDOR CERTIFICATION	
Legal Name of Vendor:			Cal/OSHA Consultation	Services	Build LACCD	
			Contractors State Licen	sing Board	California Department of General Services	
Social Security Number OR					California Department of Transportation	
Federal Tax ID Number:					California Unified Certification Program	
Telephone Number:					I mean a business that has its principal place of business in the County of	
Contractor License Info:	Class:	License No	0:	LUCAI SHA		LUS Angeles.
Web Page Address:					Emerging shall mean a firm that has been in busine	ess in its substa
					Disabled Veteran Owned business shall mean a business State of California Department of General Services or a	ess that is 51%
						U
		I				
Shipping Terms FOB Destination (C	Choose from the following):		Address (if diffe	erent from	address above)	
Prepaid & Allowed Prep	Address:	(
Product Code Categories (see pa	City:					
		State:				
		Zip:				
		Ζιρ.				
Check all categories that apply to the	207720714					
Check an categories that apply to the	company.					
SMALL						
DISABLED VETERAN OWNE	D					

LOS ANGELES COMMUNITY COLLEGES 770 WILSHIRE BOULEVARD, LOS

() Architectural/EngineeringARCH/ENG(() Audio/Visual EquipmentA/V EQUIP(() Audio/Visual SuppliesA/V SUPPLY(() AdvertisingADVERTISE(() AgriculturalAGRICULTUR(() Air ConditioningAIR COND(() AppliancesAPPLIANCES(PRODUCT CODE CATEGORY	Code	PRODUCT CO	ODE CATEGORY	Code
 Athletic Equipment ATHLETIC Autobody Supplies AUTOBODY Automotive Supplies AUTOMOTIVE Aviation Equip/Supplies AVIATION Beauty Supplies BEAUTY SUP Books Library/Educational BOOKS Building Materials BUILD MAT Chemicals – Scientific CHEMICALS Childcare Equip/Supplies CHILDCARE 	 Audio/Visual Equipment Audio/Visual Supplies Advertising Agricultural Air Conditioning Appliances Art Supplies Athletic Equipment Autobody Supplies Automotive Supplies Aviation Equip/Supplies Beauty Supplies Books Library/Educational Building Materials Chemicals – Scientific Childcare Equip/Supplies 	AVV EQUIP AVV SUPPLY ADVERTISE AGRICULTUR AIR COND APPLIANCES ART SUPPLY ATHLETIC AUTOBODY AUTOMOTIVE AVIATION BEAUTY SUP BOOKS BUILD MAT CHEMICALS CHILDCARE	((((((((((((((((((()]T07 0 TS705 Tw 0.4	48 0 Td-4(6 -1.147 0 Tw 1.103 0 Td [(

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CITY • EAST • HARBOR • MIS

a Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. Specific Instructions on page 3.	2 Business name/disregarded entity name, if different from above 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Che following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partner Note: Check the appropriate box in the line above for the tax classification of the single-member owr LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the o another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a singli is disregarded from the owner should check the appropriate box for the tax classification of its owner	Trust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from FATCA reporting code (if any)
See St	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name a	and address (optional)
0,	6 City, state, and ZIP code		
	7 List account number(s) here (optional)		
Part	Taxpayer Identification Number (TIN)		
Enter	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo	oid Social sec	urity number

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	Social security number		
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a			
TIN, later.	or		
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and	Employer identification number		
Number To Give the Requester for guidelines on whose number to enter.			

Certification Part II

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); 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. 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 for Part II, later.

Sign Here	Signature of		
Here	U.S. person ^a	Date a	

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.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

Form 1099-INT (interest earned or paid)

• Form 1099-DIV (dividends, including those from stocks or mutual funds)

• Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)

- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.