

COUNTY OF MOORE  
NORTH CAROLINA

REQUEST FOR PROPOSALS

ISSUE DATE: **December 18, 2020**

RFP#: **2021-14**

TITLE: **COPY MANAGEMENT PROGRAM SERVICES**

ISSUING DEPARTMENT: **County of Moore  
Financial Services  
206 S. Ray Street  
P.O. Box 905  
Carthage, NC 28327**

**Sealed Proposals** will be received until **4:00 p.m., Thursday, January 14, 2021** from qualified firms for Copy Management Program Services for the Moore County Information Technology Department.

All inquiries for information concerning the Request for Proposals shall be directed to:

**Terra Vuncannon, Purchasing Manager  
P.O. Box 905  
Carthage, NC 28327  
(910) 947-7118 (Telephone)  
(910) 947-6311 (Fax)**

**Sealed Proposals shall be mailed and/or hand delivered to the Issuing Department shown above and the envelope shall bear the name and number of this Request for Proposals. It is the sole responsibility of the Proposer to ensure that its proposal reaches the Issuing Department by the designated date and hour indicated above.**

**In compliance with the Request for Proposals and to all the terms and conditions imposed herein, the undersigned offers and agrees to furnish the services and install the goods described in accordance with the attached signed proposal.**

Firm Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
By: \_\_\_\_\_  
(typed)

By: \_\_\_\_\_  
(signed)

## TABLE OF CONTENTS

INSTRUCTIONS TO PROPOSERS	Page 3
SCOPE OF WORK AND PROPOSAL REQUIREMENTS	Page 6
PROPOSAL FORM	Page 12
NON-COLLUSION AFFIDAVIT	Page 13
E-VERIFY AFFIDAVIT	Page 14
W-9 FORM	Page 15
ATTACHMENTS A-E	Link provided

## INSTRUCTIONS TO PROPOSERS

1. **Sealed Proposals shall be submitted to the Issuing Department and include the enclosed Proposal Form.** In order for a proposal to be considered, it shall be based on the terms, conditions and specifications contained herein and shall be a complete response to this RFP. The County reserves the right to make an award in whole, or in part, and to reject any and/or all proposals, and to waive any informality in proposals unless otherwise specified by the Proposer. The Proposer shall sign the proposal correctly and proposals may be rejected if they show omissions, alterations of form, additions not called for, conditional proposals or any irregularities of any kind.
2. All labor costs, direct and indirect, shall have been determined and included in the proposal. The cost and availability of all equipment, materials, and supplies associated with performing the services described herein shall have been determined and included in the proposal. Please list sales tax separately in proposal figures. All price quotes shall include delivery to the delivery point, installation, and set-up charges, as necessary. Goods shall be set in place ready for owner's use. All goods shall be new and of average quality. No remanufactured, refurbished or used goods will be accepted. Appropriate product information (e.g. brochures, catalog cuts, etc.) shall be included with the proposal.
3. **After the RFP issue date, all communications between the Issuing Department and prospective Proposers shall be in writing.** No oral questions shall be accepted. Any inquiries, requests for interpretation, technical questions, clarifications, or additional information shall be directed to Terra Vuncannon at the address listed on page one of this solicitation. All questions concerning this RFP shall reference the RFP number, section, and page number. Questions and responses affecting the scope of the goods will be provided to all prospective Proposers by issuance of an Addendum. **All written questions shall be received by the Issuing Department no later than 10:00 am Monday, January 4, 2020. NO EXCEPTIONS.** All addendums pertaining to this RFP will be posted to the County website at [www.moorecountync.gov](http://www.moorecountync.gov) within 24 – 48 hours after the deadline for questions and/or after the pre-bid conference. **It is the Proposers responsibility to check the website for the addendums.**
4. The County will not be responsible for any oral instructions. Should a Proposer find discrepancies in, or omissions from the documents, or should be in doubt as to their meaning, s/he should at once notify the Issuing Department, and a written addendum shall be issued. Acknowledgement of any Addendum received during the time of the proposal shall be noted on the Proposal Form in the spaces provided. In closing of a contract, any Addendum issued shall become a part thereof. **It is the Proposer's responsibility to assure that all addenda have been reviewed and, if need be, signed and returned.**
5. Proposals will be examined promptly after opening and award will be made at the earliest possible date. The prices quoted must be held firm, and no proposals may be withdrawn

until **90 days** after proposal opening date. The County reserves the right to conduct any test/inspection it may deem advisable to ensure services/materials/supplies/equipment, as appropriate, conform to specifications.

6. The materials/supplies/equipment furnished under any resulting contract shall be covered by the manufacturer's most favorable commercial warranty. Each Proposer shall plainly set forth the warranty for the goods in the proposal. Operations and maintenance manuals for equipment shall also be provided, as appropriate.
7. All purchases for goods or services are subject to the availability of funds for this particular purpose.
8. The Service Provider shall not represent itself to be an agent of the County.
9. The General Statutes of the State of North Carolina, insofar as they apply to purchasing and competitive bidding, are made a part hereof.
10. The County of Moore is committed to creating and maintaining an environment free from harassment and other forms of misconduct that fundamentally compromise the working environment of the County. All Service Providers performing work/services at a County Detention Center shall take all necessary steps to assure that none of its employees engage in harassment or intimidation relating to personal beliefs or characteristics of anyone on the County's premises, including but not limited to, race, religion, age, color, sex, national origin, or disability. Such harassment is unacceptable and will not be condoned in any form at the County of Moore. If such conduct occurs, the Service Provider will take all necessary steps to stop it and prevent its future occurrence. This policy shall be strictly enforced.
11. For all the work being performed under this Contract, the County of Moore has the right to inspect, examine, and make copies of any and all books, accounts, records, and other writing relating to the performance of the work. Audits shall take place at times and locations mutually agreed upon by both parties, although the vendor/Service Provider must make the materials to be audited available within one (1) week of the request for them.
12. Proposers are cautioned that this is a request for proposals, not a request for contract, and the County of Moore reserves the right to reject any and/or all proposals. It further reserves the right to waive informalities insofar as it is authorized so to do where it deems it advisable in protection of the best interests of the County.
13. Proposals will be evaluated, and a recommendation presented to the County Manager and/or Moore County Board of Commissioners for their approval.
14. Any and all exceptions to the Specifications must be stated in writing, giving complete details of what is to be furnished in lieu of requested Specifications.

15. The County of Moore reserves the right to cancel and terminate any resulting contract, in whole or in part, without penalty, upon thirty (30) days notice to the Vendor(s). Any contract cancellation shall not relieve the Vendor(s) of the obligation to deliver any outstanding services issued prior to the effective date of the cancellation.
16. **Sealed Proposals in one (1) original and five (5) copies will be received from each Proposer in a sealed envelope or package. Each original shall be signed and dated by an official authorized to bind the form. Unsigned proposals will not be considered.**
17. Upon receipt by Moore County Financial Services, your Proposal is considered a public record except for material which qualifies as “trade secret” information under N.C. Gen. Stat. 66-152 et. seq. After the Proposal opening, your Proposal may be reviewed by the County’s evaluation committee, as well as other County staff and members of the general public who submit public records requests. To properly designate material as trade secret under these circumstances, each Proposer must take the following precautions: (a) any trade secrets submitted by a Proposer must be submitted in a separate, sealed envelope marked “Trade Secret — Confidential and Proprietary Information — Do Not Disclose Except for the Purpose of Evaluating this Proposal,” and (b) the same trade secret/confidentiality designation must be stamped on each page of the trade secret materials contained in the envelope.

In submitting a Proposal, each Proposer agrees that the County may reveal any trade secret materials contained in such response to all County staff and County officials involved in the selection process, and to any outside consultant or other third parties who serve on the evaluation committee or who are hired by the County to assist in the selection process. Furthermore, each Proposer agrees to indemnify and hold harmless the County and each of its officers, employees, and agents from all costs, damages, and expenses incurred in connection with refusing to disclose any material which the Proposer has designated as a trade secret. Any Proposer that designates its entire Proposal as a trade secret may be disqualified.

## **SCOPE OF WORK AND PROPOSAL REQUIREMENTS**

### **Overview**

The County of Moore is currently in a per copy agreement that expires on June 30, 2021. The County currently utilizes 96 multi-function devices that are in 30 departments at 25 physical locations within Moore County, North Carolina. Please see Attachment A for details of current devices and utilization.

The County generates approximately 3,134,429 monochrome and 709,847 color prints annually.

### **Objective**

The County is seeking proposals for a per print or flat rate device management program.

The County is seeking to implement a comprehensive multi-function device (MFD) management program which standardizes equipment and creates efficiencies across the entire County. The proposal must include solutions that print in color and monochrome.

The County is looking for solutions that will help control the cost of printing, copying and provide methods to reduce print needs. We will also explore the ability for consolidation where there is non-networked laser, non-laser printers and stand along scanners and fax machines.

To meet these needs, we are requesting proposals for NEW MFDs that support common device features which are detailed in the “Device Common Features” section of this document. The proposed equipment must support the documented device utilization (see Attachment A) including historic print volume and current device functionality.

The County of Moore does not guarantee any daily, monthly, quarterly, or annual volumes.

The County is interested in a vendor interface that provides the ability for support request to be submitted and monitored by Moore County Information Technology office with real time information of work order status.

The vendor shall furnish, deliver, install, properly train staff, and maintain equipment to the County’s complete satisfaction. The proposal shall include ALL operating supplies, maintenance, and hardware (excluding paper). The vendor is expected to have replacement devices in stock or be able to obtain in a timely manner.

Before the contract is awarded, the selected vendor will be required to bring proposed equipment on site and confirm seamless functionality with the County network and specific software applications. A list of applications can be found within the “Application Connectivity” section of this document.

The County will work with awarded vendor to develop a Service Level Agreement (SLA). If the vendor does not meet agreed terms of the SLA, the County will charge an agreed upon penalty. Any penalty will be deducted from the invoice unless customer is given satisfactory explanation for the failure to meet service obligation. Satisfactory explanation shall be determined by the County.

The vendor will work with Moore County Information Technology staff to create a plan to transition to the awarded proposed solution. The vendor will provide a single point of contact for the duration of the contract. New equipment should be delivered, installed, and operating within 30 days of the awarded contract.

The vendor is expected to invoice the County of Moore per agreed upon invoicing efforts.

### **Device Common Features**

The items listed are meant to define the basic features, options, and technical capabilities that the equipment must provide, but not necessarily required for every device.

- Network Enabled
- Automatic Document Handler
- Automatic Duplex
- Sorter/Finisher
- Sorter Hole Punch
- Sorter Stapler
- Multiple paper trays (Variable size adjustable paper trays; letter size, legal size, ledger size, and envelopes)
- Secure and/or Hold print
- Access codes for Departmental cost accounting
- Allowances for various services
- Print/Copy
  - Color and monochrome
  - Print minimum of 600dpi
  - Duplex printing
  - Network Print
  - Accommodate card stock
  - Paper size
    - Standard envelope
    - 8.5 x 11
    - 8.5 x 14
    - 11 x 17
    - Postcards
- Secure Faxing
  - Connectivity via analog phone line
  - Allows long distance authorization code entry
  - Electronic fax to network location or internal email.
- Scanning
  - Color and monochrome
  - Scan to internal email
  - Scan to network file shares

- Scan directly into applicable production software applications identified in “Application Connectivity” section of this document.
- Duplex
- Scan minimum dpi of 600
- Scan documents into a minimum of:
  - TIFF
  - JPEG
  - PDF
  - PDF/OCR
- Devices should not be able to scan to or print from any external drive such as USB or to external emails as this does not meet our security protocol.

**Security and Network Connectivity:**

- All MFDs should have the capability to be hard wired connected to the County network and meet security specifications identified by the County.
- Some devices will not be managed on the County network and may include other locations during the term of the contract. Currently this includes the following locations:
  - County Libraries
  - Moore County Wellness Center
  - Moore County Cooperative Extension
- The County would prefer to have all machines managed by a cloud supported portal. This portal would have the ability to do the following for each device:
  - Store configuration backup including fax and scan to configurations, template configurations, and access codes.
  - Store address book entries.
  - Store and update latest print drivers, security patches, and firmware updates.
- Concerning the hard drives contained on each device:
  - No County data should be stored on the MFD hard drives once a print/scan/fax operation is completed.
  - All hard drives should be properly wiped/destroyed if the device is being removed from the County.
  - A certificate of data wipe must be provided.
- The device Administrative password will need to be changed to an agreed upon password with no machines having the manufactures default password.

**Application Connectivity:**

The County utilizes several software applications that the proposed devices should be able to work with:

- Department of Social Services Northwoods/Compass printing/scanning (see attachment B)
- Child Support State printing (see attachment C)
- Library EnvisionWare (see attachment D)
- Financial Services Department Tyler/Munis printing/scanning (see attachment E)
- Microsoft Office365
- Health Department Patagonia printing/scanning

**Training Requirements:**

- Training for the departmental IT representative or other designated personnel shall be provided after installation of a new or different device. This training is preferred in-person, but the County will consider other virtual methods if adequate.
- On-going training is to be provided as needed at NO additional cost to the County.

**Administrative Requirements:**

The vendor shall provide Moore County with the following:

- Consolidated invoicing that includes year-to-date summaries.
- Quarterly Master Activity Report that should include:
  - All sites' activities by department account
  - Machine identification number
  - Machine model number
  - Machine beginning and ending meters
  - Machine total print volume
  - Each individual department account shall also be totaled together.

If a secure monthly automated meter reading service is available, a monthly meter reading report should be provided to the County by the end of the 1<sup>st</sup> full week of the preceding month.

The vendor shall provide the County a monthly report of any service calls during the month, if a secure cloud web reporting system is not available to meet this need.

The vendor should be available to meet with the County administrator as requested to review usage trends, service issues, etc.

Invoices will be paid within 30 days from receipt of invoice.

**Pricing:**

The County shall compensate the awarded vendor by choosing one of the following two options.

**Option 1:** Per Copy Compensation

The County will compensate the vendor on a PER COPY basis for a term of 5 years, which shall represent the total compensation to the vendor. The vendor shall NOT inflate this PER COPY rate for the duration of this agreement; however, the vendor may decrease the rate at any time during the program term.

- a. Meter readings will be provided to the vendor on an agreed upon method.

**Option 2: Flat Rate Device Compensation**

The County will compensate the vendor on a PER DEVICE basis for a term of 5 years, which shall represent the total compensation to the vendor. The rate of per device shall NOT increase during the contract term; however, the vendor may decrease the rate at any time during the program term.

- a. The vendor shall provide an annual invoice.
- b. Any additional devices that are requested by the County will be prorated for that annual term and invoiced once received by the County. Any devices that are removed by the County will be prorated with a credit immediately to the County once the device is removed.

The following terms apply to both options of compensation:

- The County will not be charged for any property tax, usage tax, energy tax or document handling fees.
- All supplies (except paper) will be included in the program cost.
- All service, regular maintenance, parts, supplies and labor will be included in the program cost.
- All parts supplied by vendor will be Original Equipment Manufacturer (OEM) for the term of the contract, no generic parts will be allowed. The vendor will be responsible for keeping an adequate stock of supplies and repair parts so that no County department has an unreasonable delay in productivity
- If there are any additional usage charges, please include those separately.

**Proposal Content:**

**Please describe how your organization shall fulfill the COUNTY'S requirements for a program designed to meet the current and future needs.**

- 1) Define each model of machine proposed including:
  - a) Manufacturer
  - b) Model
  - c) Minimum number of prints per month acceptable to keep machine in place
  - d) Maximum number of prints per month for this machine
  - e) Picture of the proposed device

- 2) Describe how changes to the contract including machine additions and deletions would be handled administratively and operationally.
- 3) Identify what constitutes a page print count.
- 4) Describe the approach your company will take to train users on the equipment.
- 5) Describe the approach your company will take to deploy the equipment during implementation.
- 6) Describe how your company will respond to a request for device relocation.
- 7) Describe your approach to equipment replacement if a device does not meet agreed upon SLA's.
- 8) What is the turnaround time for replacement of out of service device?
- 9) Describe the approach your company will take for supplies replenishment.
- 10) Describe the approach your company will take to resolve service issues with equipment under the contract.
- 11) Describe your approach if a device needs to be replaced.
- 12) Describe how your scanning solution will work.
- 13) Describe how your faxing solution will work.
- 14) Describe how your network printing solution will work.
- 15) Describe your tools for managing the devices and how the County of Moore Contact and IT personnel could utilize these tools.
- 16) Describe the security features of the products you are proposing.
- 17) Describe your service levels, response times and problem resolution methodologies.
- 18) Vendors should highlight competitive advantages in their proposal
- 19) Describe how your company will obtain meter readings and how often.
- 20) Describe your invoice process.

## **References**

Vendor should submit a minimum of three references for similar services, preferably local or state government entities.

## **Proposal Evaluation Criteria:**

Will assign a score of 1-Poor to 10- Excellent for each category. Each category will have a weighted value as listed below.

1. **Support & Maintenance:** Service Level Agreement (SLA), support process, machine replacement process, outage response/replacement. (25)
2. **Cost:** Annual cost, billable page count. (25)
3. **Functionality:** Does the proposed solution integrate with known applications? Does the proposed solution meet our network and security needs? Scanning solution, Fax solution, Network printing? (25)
4. **Administrative:** Invoice processes including capture of meter readings. Equipment standardization, staff training, supplies process, management resources. (15)
5. **References.** Does the vendor have local government/State agency customers? Has the vendor provided adequate references? Reference check. (10)

## PROPOSAL FORM

The County of Moore requests your proposal to provide Copy Management Program Services for the County of Moore Public Information Technology Department as outlined in the Scope of Work.

Sealed Proposals will be received until 4:00 pm Thursday January 14, 2021 at Financial Services, 206 S. Ray Street, Carthage, NC 28327. Opening will not be public.

Use this form for submitting proposals. In submitting your proposal, keep in mind that any alterations, changes in proposal format, etc. will make it difficult to evaluate proposals. All items should be in the units, quantities, units of measurements, etc. specified. Do not submit alternates unless requested. The County of Moore shall reserve the right to reject any and/or all proposals.

---

On behalf of \_\_\_\_\_ (Proposer), I am submitting a proposal for Copy Management Program services for the County of Moore Information Technology Department.

**Responsive Bid MUST include:**

**One Original and Five (5) copies of response**

**ALL components of the Proposal (including Pricing Options)**

**Signed Proposal Form**

**Non-Collusion Affidavit**

**E-Verify Affidavit**

**W-9 Form**

I certify that the contents of this proposal are known to no one outside the undersigned, and to the best of my knowledge all requirements have been complied with.

Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_

Authorized Signatory Name/Title/E-mail Address: \_\_\_\_\_

---

Receipt of the following addendum is acknowledged:

Addendum No. \_\_\_\_\_ Date: \_\_\_\_\_

Addendum No. \_\_\_\_\_ Date: \_\_\_\_\_

**NON-COLLUSION AFFIDAVIT**

North Carolina of North Carolina  
County of Moore

I \_\_\_\_\_, being first duly sworn, deposes and says that:

He/She is the \_\_\_\_\_ of \_\_\_\_\_, the proposer that has submitted the attached proposal;

He/She is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such proposal;

Such proposal is genuine and is not a collusive or sham proposal;

Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, Employees or parties of interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Proposer, firm or person to submit a collusive or sham proposal in connections with the contract for which the attached proposal has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached proposal or of any other Proposer or to fix overhead, profit or cost element of the proposal price of any other Proposer or to secure through collusion, conspiracy, connivance or unlawful agreement any advantage against the County of Moore or any person interested in the proposed contract; and

The price or prices quoted in the attached proposal are fair, proper and are not tainted by any collusion, conspiracy, connivance, or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

\_\_\_\_\_  
Signature and Title

North Carolina of North Carolina  
County of \_\_\_\_\_  
Subscribed and sworn before me,  
This \_\_\_\_ day of \_\_\_\_\_, 2021

\_\_\_\_\_  
Notary Public  
My commission expires \_\_\_\_\_

**Moore County E-Verify Affidavit**

STATE OF NORTH CAROLINA

AFFIDAVIT

COUNTY OF MOORE

I, \_\_\_\_\_ (the individual attesting below), being duly authorized by and on behalf of \_\_\_\_\_ (the entity bidding on project hereinafter "Employer") after first being duly sworn hereby swears or affirms as follows:

1. Employer understands that E-Verify is the federal E-Verify program operated by the United States Department of Homeland Security and other federal agencies, or any successor or equivalent program used to verify the work authorization of newly hired employees pursuant to federal law in accordance with NCGS §64-25(5).
  2. Employer understands that Employers Must Use E-Verify. Each employer, after hiring an employee to work in the United States, shall verify the work authorization of the employee through E-Verify in accordance with NCGS§64-26(a).
  3. Employer is a person, business entity, or other organization that transacts business in this State and that employs 25 or more employees in this State. (mark Yes or No)
    - a. YES \_\_\_\_\_, or
    - b. NO \_\_\_\_\_
  4. Employer's subcontractors comply with E-Verify, and if Employer is the winning bidder on this project Employer will ensure compliance with E-Verify by any subcontractors subsequently hired by Employer.
- Executed, this \_\_\_\_ day of \_\_\_\_\_, 2021.

\_\_\_\_\_  
Signature of Affiant  
Print or Type Name: \_\_\_\_\_

State of North Carolina  
County of \_\_\_\_\_

Signed and sworn to (or affirmed) before me, this the \_\_\_\_  
day of \_\_\_\_\_, 2021.

My Commission Expires:

\_\_\_\_\_  
Notary Public

(Affix Official/Notarial Seal)

**Request for Taxpayer  
 Identification Number and Certification**

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	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 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____	(Applies to accounts obtained outside the U.S.)
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	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). 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.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; border: 1px solid black; text-align: center;">-</td> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; border: 1px solid black; text-align: center;">-</td> <td style="width:40%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-		-	
	-		-		
or					
Employer identification number					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; border: 1px solid black; text-align: center;">-</td> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; border: 1px solid black; text-align: center;">-</td> <td style="width:40%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-		-	
	-		-		

**Part II Certification**

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

**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](http://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.

**ATTACHMENTS A – E**

Located at [www.moorecountync.gov](http://www.moorecountync.gov) under Bid Opportunities >RFP 2021-14