



Hennepin County Office of Budget & Finance  
Accounts Payable Section

**Automated Clearinghouse (ACH) Enrollment**

Complete this form and return it to: Hennepin County - Accounts Payable  
A-1201 Government Center  
OBF.Internet@hennepin.us OR 300 South 6<sup>th</sup> Street  
Minneapolis MN 55487-0128

Payee Name

Address City / State / Zip Code

Area Code & Phone Number	E-mail Address for Remittance Advice
<input type="checkbox"/> New ACH Enrollment - or - <input type="checkbox"/> Account Change - Required: Routing # to remove _____ Account # to remove _____	

I authorize Hennepin County and the financial institution listed below to initiate electronic credit entries and, if necessary, debit entries and adjustments for any credit entries in error to the account listed below for the purpose of receiving payment for billed goods/services. I understand that payment will be made by an ACH transaction and that the remittance information will be sent via email. Remittance information will not be provided in any other format. This authority will remain in effect until canceled in writing.

Type of account:

Checking - Enclose a voided blank check (preferred) or print the account and routing numbers legibly below.

Savings - Print the account and routing numbers legibly below

Financial Institution

Account Number at Financial Institution (not needed if enclosing a voided blank check)

Transit Routing Number (ABA)  
(not needed if enclosing a voided blank check):

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Authorized By - Print Name, Title & Date

Authorized Signature

<b>Hennepin County General Accounting</b> <b>A-12 Government Center MC 128</b> <b>300 South 6th Street</b> <b>Minneapolis, MN 55487-0128</b> Email: <a href="mailto:OBF.Internet@hennepin.us">OBF.Internet@hennepin.us</a>	<b>SUBSTITUTE FORM W-9 and Vendor Information Form</b>
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**IMPORTANT TAX INFORMATION - PLEASE READ THIS NOTICE CAREFULLY**

This form was developed to comply with Internal Revenue Service (IRS) regulations and Minnesota statute and to assist Hennepin County in paying providers and vendors for their goods and services. You, as a payee, are required by law to provide us, as payer, your correct Taxpayer Identification Number (TIN). This information will only be shared with the IRS. The Minnesota Government Data Practices Act classifies the Social Security Number as private. Unless otherwise provided by law, the home address is also private. Direct questions to 612-348-2976.

**Failure to respond to this request can result in IRS-mandated withholding on future payments as well as other penalties.**

If you are an existing Hennepin County vendor and wish to update your information, check this box:     **Update information only**

<b>Contract Number</b> (if available)		
<b>Taxpayer Identification Number</b> <small>(TIN): Enter your social security number (SSN) if an individual or federal employer identification number (EIN) if a business.</small>	<b>SSN / EIN:</b>	
<b>Provider Name and Remittance Address:</b> <small>NOTE: Name must match your social security card if you are an individual or sole proprietor. All other businesses must use the name that was used when your employer identification number was applied for.</small>	<b>Name:</b>	
	<b>Business Name, if different from above:</b>	
	<b>Remit Address:</b>	
	<b>City, State &amp; ZIP:</b>	
	<b>Remit Phone #:</b>	
	<b>Company Website/URL:</b>	
<b>Provider Order Address Information</b>	<b>Order Address:</b>	
	<b>City, State &amp; ZIP:</b>	
	<b>Order Contact Name:</b>	
	<b>Order Phone #:</b>	
	<b>Order Email Address:</b>	
<b>Purchase Order Preferences</b>	<b>By which method do you prefer to receive purchase orders?</b> <input type="checkbox"/> Email <input type="checkbox"/> US Mail	
<b>Business Structure</b>	<b>Number of Employees</b>	<b>NAICS Code</b> <small>(see <a href="http://www.naics.com/search">www.naics.com/search</a>)</small>

**Certification:** Under penalties of perjury, I certify that:

- 1) The number shown on this form is my correct taxpayer identification number, and the name shown is the correct corresponding name.
- 2) I am subject to 1099 reporting unless one of the following is checked:  
 Government Entity.  
 Tax Exempt Organization.  
 Corporation that does not provide medical services or billing/collection for medical services.  
 Other (please specify): \_\_\_\_\_
- 3) I am a U.S. person (including a U.S. resident alien).
- 4) 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 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.

**Certification Instructions:** You must cross out item 4 above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting of interest or dividends on your tax return.

<b>Print and Sign Here:</b>	<b>Name Printed:</b>	<b>Title Printed:</b>	
	<b>Signature:</b>	<b>Phone:</b>	<b>Date:</b>

## HENNEPIN COUNTY CONTRACTOR AFFIRMATIVE ACTION (AA) CLASSIFICATION

The information requested below is used internally by Hennepin County to monitor and report on participation in county contracting. Your cooperation in completing this form is greatly appreciated.

Vendors who do not complete this information may be contacted by Hennepin County to provide the information requested. If you have questions completing this side of the form, please call: (612) 348-3181.

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1) **Check One:**

- Publicly held company<sup>1</sup>
- Non-profit entity
- Government entity
- Other



*If you chose one of these, STOP HERE.*

*If you chose "Other" please answer all remaining questions*

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2) **Check One:**

- Small Business Certified by CERT Program<sup>2</sup>
- NOT a CERT<sup>2</sup> Certified Small Business

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3) **Check One gender of majority owner:**

- Male
- Female

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4) **Check One ethnicity of majority owner<sup>3</sup>:**

- Black/African American
- Hispanic
- Asian or Pacific Islander
- American Indian or Alaskan Native
- White/Caucasian

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<sup>1</sup> **A Publicly Held Company** is a company whose stock is traded on the open market.

<sup>2</sup> **Small Business Enterprise Certification:**

While certification is not necessary to do business with Hennepin County, only CERT certified businesses can be counted toward the goal for Small Business Enterprise (SBE) participation in county contracting. Certification also boosts market exposure and qualifies businesses to access SBE program services. For further information about certification, please call 651-266-8900 or visit the Central Certification Program's website at: <http://cert.smwbe.com>.

<sup>3</sup> **Ethnicity and Gender Definitions:**

**Black/African American:** All persons having origins in any of the Black racial groups of Africa.

**Hispanic:** All persons of Mexican, Puerto Rican, Cuban, Central or South American descent or other Spanish culture of origin, regardless of race.

**Asian or Pacific Islander:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent or the Pacific Islands, including, for example, China, Japan, Korea, Hawaii, Guam, the Philippine Islands and Samoa.

**American Indian or Alaskan Native:** All persons having origins in any of the original peoples of North America, and who maintain tribal affiliation or community attachment.

**White/Caucasian:** All persons with origins in any of the original peoples of Europe, North Africa or the Middle East.