

Yurok Health & Human Service



LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)

Wood Vendor / Energy Supplier Agreement Letter

All Wood Vendors must agree to the following written requirements:

- Any Wood Vendor or Energy Supplier receiving payment from the Yurok Tribe agrees not to discriminate, either in the cost of wood or the services provided against the eligible household on whose behalf the wood is supplied.
- Wood being supplied is obtained legally and if requested, verification must be provided.
- Copy current Driver's License will be provided.
- Completed W-9 form will be provided.
- Each wood allocation must be ½ seasoned. The amount of wood per eligible household will be one cord.
- **Wood for Elders or Disabled adults will be chopped to 6" in diameter and stacked. If you cannot stack the wood yourself, you must have an abled bodied person with you to do so.**
- All names and household information given to Wood Vendors must remain confidential. Any violation in this regard will result in immediate termination of the current Wood Vendor / Energy Supplier Contract.
- Delivery must be completed within 10 days of receipt/notification.
- Completed wood receipts returned within 3 business days (faxed or post marked) from date of delivery.

By signing below, I verify that I understand and agree to the requirements listed above.

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Verbal Authorization Given

Wood Vendor / Energy Supplier Signature

Date

YHHS Staff Signature

Date

Yurok Health & Human Service



LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)

Wood Vendor / Energy Supplier Vendor Agreement

I (company or private party), _____, have read and fully understand terms and conditions stated in the Yurok Tribe LIHEAP Agreement Letter. I agree to comply all terms and conditions stated in the Agreement Letter.

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Verbal Authorization Given

Printed Name

Wood Vendor / Energy Supplier Signature

Date

Address

Phone

Service Area:

☐
☐
☐

North
South
East

Yurok Health & Human Service



I, _____, have read the Wood Vendor / Energy Supplier Agreement Letter and Vendor Agreement and will comply with the Yurok Tribe LIHEAP Policies in order to be a Wood Vendor / Energy Supplier in the area of Humboldt / Del Norte County.

I understand that I will be paid \$500.00 per cord of wood delivered within my service area and \$550.00 per cord of wood delivered outside of my service area. Service Areas are defined as: North, South, and East.

I have been informed that no other member of my household will be eligible to receive assistance from Yurok Tribe LIHEAP as I am being paid for my services as a Wood Vendor / Energy Supplier from the Yurok Tribe LIHEAP.

Please list all members of your household:

Name	Age
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

I understand that if it is discovered that a member of my household has received services from Yurok Tribe LIHEAP, I will have broken my contract and will no longer be paid as a Wood Vendor / Energy Supplier by Yurok Tribe LIHEAP.

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Verbal Authorization Given

Wood Vendor / Energy Supplier Signature

Date

Address

Phone

Social Security Number

Approved:
Revised: 1/2021

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	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; check only one of the following seven boxes: ☐ Individual/sole proprietor or single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. ☐ Other (see instructions) ▶ _____ ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ 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) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	Yurok Tribe PO Box 1027 Klamath, CA 95548
	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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	

Part II Certification

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 on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.