



# Gregg County Purchasing Department

*Kelli L. Davis, CPPB, Purchasing Agent*

101 E. Methvin St., Suite 205, Longview, Texas 75601

(903) 237-2684 ♦ [purchasing@co.gregg.tx.us](mailto:purchasing@co.gregg.tx.us)

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Dear Vendor:

Welcome to Gregg County!

Attached please find information and forms that must be completed prior to doing business with Gregg County. **Please note vendors must submit a completed and signed W-9 and a Certificate of Insurance.** Vendors should also visit the Gregg County Purchasing Department Webpage regularly for bid opportunities information, and updates. ([www.gregg.co.tx.us/purchasing](http://www.gregg.co.tx.us/purchasing)). I have also listed some helpful hints below to aid you in doing business with Gregg County. Please contact the Purchasing office via email or phone should you have any questions or require assistance in completing this application.

Thank you for your interest in doing business with Gregg County; we look forward to working with you!

Kelli L. Davis, CPPB  
Purchasing Agent  
Gregg County, Texas

## **Helpful Hints:**

### **Vendors Should Always:**

- ✓ Request and obtain a Purchase Order Number from the County prior to delivering any items or performing services.
- ✓ Reference the Purchase Order Number on the invoice.
- ✓ Obtain a legible signature, the name and telephone number from the individual receiving the goods or services on behalf of the ordering department.

### **Vendors should NOT:**

- ✓ Accept verbal orders placed by an employee outside the Purchasing Office.
- ✓ Accept orders without a Purchase Order Number.
- ✓ Modify orders unless the Purchasing Office has issued an amendment to the Purchase Order.
- ✓ Invoice for items that have not been delivered.

**Gregg County Purchasing Department**  
101 E. Methvin St., Suite 205, Longview, Texas 75601  
Phone (903) 237-2685 ~ Fax (903) 237-2682 ~ [Purchasing@co.gregg.tx.us](mailto:Purchasing@co.gregg.tx.us)

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**VENDOR REGISTRATION REQUEST FORM**

To: Gregg County Purchasing Dept.  
Fax: (903)-237-2682 or  
E-Mail: [Purchasing@co.gregg.tx.us](mailto:Purchasing@co.gregg.tx.us)

Requested by:

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Phone

E-mail

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Name of Vendor (As reported on Federal tax return)

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Contact Name

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Billing Address

City/State/Zip

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Telephone

Facsimile

E-mail

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**A COMPLETED AND SIGNED W-9 AND CERTIFICATE OF INSURANCE  
MUST BE ATTACHED TO THIS REQUEST**

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# Gregg County, Texas

Purchasing Department

101 E. Methvin, Suite 205

Longview, Texas 75601

Office: 903-237-2684 Fax: 903-237-2682

<http://www.co.gregg.tx.us/> Email: [purchasing@co.gregg.tx.us](mailto:purchasing@co.gregg.tx.us)

## VENDOR INFORMATION FORM

Complete the information below and check the appropriate commodity or classification numbers for the items, materials, or services your company offers on the following pages. These numbers are listed in the State of Texas NIGP commodity book at [http://www.window.state.tx.us/procurement/com\\_book/](http://www.window.state.tx.us/procurement/com_book/)

Vendors presently doing business with the County should complete a new form if current information changes to assure correct placement in the computerized commodity system and to assure receipt of bid information (i.e. new address, phone or fax number). Misrepresentation of facts may disqualify bidder.

### Please type or print information

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Company Name

DBA Name

---

Remittance Address

---

Purchase Order Address (if different)

---

A/R Contact

E-mail

---

Phone

Fax

---

Sales Representative

E-mail

---

Phone

Fax

---

Tax ID Number

Discount if offered, terms

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Signature/Title

Date

Certifications (Please include copies of certificates):

Historically Underutilized Business (HUB)

Certificate of Insurance

Woman-Owned

Minority Owned

## ***Conflict of Interests***

Beginning January 1, 2006, a new state law (Chapter 176 of the Texas Local Government Code) requires the filing of conflict of interest questionnaires by certain individuals and businesses.

The questionnaire requires disclosure of certain business and gift giving relationships, if any, the filers may have with commissioners court members, the purchasing agent, and any other elected/appointed officials.

The new law applies to:

- ✓ businesses and individuals who contract with the County,
- ✓ businesses and individuals who seek to contract with the County, (regardless of whether a bidder is awarded the contract), and
- ✓ Agents who represent such businesses in their business dealings with the County.

If you have any questions about compliance, please consult your own legal counsel. Compliance is the individual responsibility of each individual, business, and agent who is subject to the law's filing requirement.

If you are required to file a Conflict of Interest Questionnaire, you should file with the county clerk by mailing it to the county clerk's office at:

Gregg County Clerk  
101 East Methvin, Suite 200  
Longview, Texas 75601

Phone: 903-237-8430

Fax: 903-237-2574

# CONFLICT OF INTEREST QUESTIONNAIRE

## FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.

A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

### OFFICE USE ONLY

Date Received

**1** Name of person who has a business relationship with local governmental entity.

**2**  Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

**3** Name of local government officer with whom filer has employment or business relationship.

\_\_\_\_\_  
Name of Officer

This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?

Yes       No

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?

Yes       No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

Yes       No

D. Describe each employment or business relationship with the local government officer named in this section.

**4**

\_\_\_\_\_  
Signature of person doing business with the governmental entity

\_\_\_\_\_  
Date

# 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.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <hr/> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><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</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><b>Note:</b> 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 <b>not</b> 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.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p><b>6</b> City, state, and ZIP code</p> <hr/> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p> <hr/>

## 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.

<b>Social security number</b>											
				-			-				
<b>or</b>											
<b>Employer identification number</b>											
				-							

## 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 for Part II, later.

<b>Sign Here</b>	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.** 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-DIV (dividends or 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.*