



**City of Burnet  
Request for Proposals**

**Grant Administrative Services for NRCS  
Emergency Watershed Protection (EWP)  
Buyout Program**

**REQUEST FOR PROPOSAL  
RFP 2026-005**

**301 East Jackson Street  
Burnet, Texas 78611**

**Issue Date: April 1, 2026**

**CITY OF BURNET  
301 EAST JACKSON STREET  
BURNET, TEXAS 78611**

**NOTICE TO GRANT/CONSULTING FIRMS**

**REQUEST FOR PROPOSALS FOR GRANT ADMINISTRATIVE SERVICES FOR  
NRCS EWP BUYOUT PROGRAM**

The City of Burnet (City) is requesting proposals (in accordance with procurement regulations under 2 CFR Part 200 and applicable USDA Natural Resources Conservation Service (NRCS) guidelines) from qualified grant administration or consulting firms to provide grant administration services for the NRCS Emergency Watershed Protection (EWP) Buyout Program. The procurement method is Sealed Competitive Proposals selection per Texas LGC 2254 and 2 CFR Part 200.320.

The Project consists of a total estimated budget of approximately \$5,749,158, including \$4,393,243.50 in federal NRCS funds and \$1,355,914.50 in required local match.

This Project includes the acquisition, demolition, and restoration of flood-damaged properties in Burnet, Texas following the July 2025 flood event.

DBE/WBE/MBE participants are encouraged to submit in accordance with 2 CFR §200.321. Please include documentation of such qualifications in your submittal.

Proposals must be received no later than **11:00 a.m. on May 1, 2026**. Late proposals will not be considered.

Submit proposals in a sealed envelope labeled:  
“Grant Administration Proposal – NRCS EWP Buyout Program”

To:  
City of Burnet  
Attn: City Secretary  
301 East Jackson Street  
Burnet, TX 78611

Questions may be submitted to:  
Keith McBurnett, Assistant City Manager  
(512) 756-6093  
kmcburnett@cityofburnet.com

Deadline for questions: April 28, 2026; 11:00 a.m.

## **1. SERVICES OVERVIEW:**

Grant administration and management services for the NRCS Emergency Watershed Protection (EWP) Buyout Program Project #5120, Award ID NR267442XXXXC005, which includes the acquisition and removal of up to 13 flood-damaged structures and restoration of properties to open space.

## **2. BACKGROUND:**

In response to the July 2, 2025 severe storms and flooding, the City of Burnet was awarded funding through the NRCS Emergency Watershed Protection (EWP) Program to implement buyout measures that address imminent threats to life and property.

The Project includes buyouts at approximately 13 locations within the City of Burnet and involves compliance with federal acquisition, relocation, demolition, and environmental requirements.

The City is seeking a qualified firm to administer the grant from initiation through closeout.

## **3. PURPOSE AND OBJECTIVE:**

The purpose of this RFP is to obtain professional services for the administration and management of the NRCS EWP Buyout Program.

The City of Burnet has identified the following objectives:

- Ensure full compliance with NRCS EWP program requirements, including separation of Financial Assistance (FA) and Technical Assistance (TA) costs
- Assist the City in efficient and compliant property acquisition and buyout processes
- Support Uniform Relocation Assistance (URA) compliance and coordination with affected property owners
- Coordinate with separately procured service providers to include, but not limited to appraisals services and title services
- Provide oversight of consultants, contractors, and acquisition services
- Ensure timely reimbursement and proper documentation of all eligible costs
- Coordinate with NRCS staff and provide ongoing reporting and communication
- Provide updates and reports to City staff and City Council.
- Provide grant oversight and contract services during all phases of the Project.

### **I. PROCUREMENT PROCESS AND INSTRUCTIONS**

The evaluation and selection of the successful administration firm and the negotiations and procurement of services will proceed as follows:

Submission of Proposals: Administration firms that wish to participate must submit responses as directed in this response package. Any and all costs related to the preparation, submittal, and presentation of the response package are the sole responsibility of the responding firm and will not be assumed in whole or in part by the City of Burnet.

Proposals must be received no later than **the deadline date noted above**. Proposals received

after this date will not be considered.

Proposals must be submitted in a sealed envelope to the location and time noted above.

### Contents of Proposals:

The City of Burnet intends to award a contract for grant administration services to the qualified firm whose response, together with any information developed in any follow-up oral interview, provides the greatest value to the City of Burnet. Firms responding will be evaluated on the basis of information provided in their response (together with any such interview, if necessary), which response shall, at a minimum, include the following information:

1. Firm name, address, nature of entity (partnership, corporation, joint venture, etc.), and general background.
2. Tabulate and/or index each section other than an introductory page and index:
  - Key Personnel & Project Team Chart
  - Project Approach
  - Qualifications & Experience
  - Similar Projects Summaries & Contacts
  - Claims, Litigation & Insolvency
  - Cost of Services & Fee Schedule
3. Organization profile including, without limitation, the following:
  - Organizational chart
  - A list of your present employees who will oversee this Project for the City of Burnet. For each employee, include his/her resume which includes education, related experience, other pertinent information, and the names, addresses and project contacts for projects on which the individual performed the same, or similar, roles to those proposed for the Project.
  - Total number of full-time employees in the organization broken down by position categories.
4. Provide a summary of five (5) representative jobs of similar scope and cost previously completed by your firm particularly involving Federal grant administration; Property acquisition or buyout programs; NRCS, FEMA, HUD, or other federally funded projects. Provide the name of the owner, contact person and telephone number, e-mail address, approximate contract value, and name of responsible person in your firm. Were each of the projects listed completed on time and within budget?
5. Have you ever been sued or been subjected to arbitration by an owner or a contractor? If so, state the name and address of the party asserting a claim against you, and the nature and outcome of the dispute.
6. Have you ever filed for bankruptcy, been declared insolvent, or otherwise been involved in insolvency proceedings?
7. The successful respondent must provide proof of professional liability insurance in the amount of \$ 1,000,000 per occurrence before any work can begin, along with general liability, workers' compensation insurance, and other coverages as required by the City.

8. State a lump sum fee for listed services. Indicate whether reimbursable expenses are billed at actual cost or include a markup. If a markup is applied, specify the multiplier. The City prefers expenses to be billed at actual cost.
9. Provide an estimated schedule of deliverables.
10. Provide a fee schedule for all positions for any additional work that may be requested.
11. Provide any and all additional information which you believe is pertinent to your evaluation by the Grant Administration Evaluation Team.

## **II. PROPOSAL REVIEW AND EVALUATION**

The City of Burnet has an Administration Evaluation Team to review and evaluate the written responses to this request. One or more firms may be selected for further competition and may be required to participate in an oral interview to answer questions from the Team. All persons with major responsibilities for grant administration or management should be present at the interview. The City will select the firm whose proposal offers the best value for the City based on the selection criteria and the City's evaluation.

Upon completion of the foregoing process, the Team will rank firms based on the factors below so that negotiations may proceed with the top-ranked firm. The City of Burnet reserves the right to reject any and all submissions and its decision to do so shall be final.

## **III. EVALUATION FACTORS**

Proposals submitted will be subject to the following evaluation process:

1. All proposals will be evaluated individually on their technical merits prior to examining price.
2. Price: 50 point maximum.
3. The technical evaluation will consist of a qualitative review of the following factors – 50 point maximum:
  - **Qualifications and Experience:** Abilities, experience (similar projects, size of community, location, total project cost), and qualifications of the firm and key personnel assigned to the project. Include at least three references.
  - **Relevant Project Experience:** Experience with federal grant administration (NRCS, FEMA, HUD, etc.), particularly projects involving buyouts, property acquisition, and URA compliance.
  - **Project Approach and Understanding:** Demonstrated understanding of the NRCS EWP Buyout Program requirements and the firm's approach to successfully administering the Project.
  - **Capacity and Availability:** Ability to provide services in a timely manner, including current workload and availability of staff.
  - **Past Performance and References:** Prior experience with similar projects, including size, scope, and outcomes. Include at least three references from clients familiar with the firm's performance.

- Schedule and Project Management: Firm's approach to scheduling, coordination, and maintaining compliance with project timelines, including management of subcontractors, if applicable.
- Certified statement that the offeror is not debarred, suspended or otherwise prohibited by any Federal, State or local agency.
- The awarded vendor may be required to hold an active status on the SAM.gov website, if applicable, <https://sam.gov>, and with the Texas Comptroller Taxable Entity website <https://mycpa.cpa.state.tx.us/coa/>

The offeror is encouraged to submit references, resumes, examples of work or other data that will help the review panel make objective determinations of the above.

#### **IV. ADDITIONAL INFORMATION & REQUIREMENTS**

Cost will be a factor but not necessarily the primary factor in this decision.

A separate complete fee schedule of all services available should be provided in the event that additional services were to be required.

#### **V. PROJECTED SCOPE OF WORK**

Grant administration and management services shall include, but not be limited to, all tasks necessary for the successful implementation of the Project in accordance with NRCS Emergency Watershed Protection (EWP) Program requirements, including:

- Adherence to Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards under 2 CFR Part 200.
- Compliance with all applicable NRCS EWP Program guidelines, cooperative agreement requirements, and federal regulations governing property acquisition, demolition, and site restoration.
- Monitoring the performance of consultants, contractors, and service providers to ensure compliance with Project goals, timelines, and performance standards established in the grant agreement.
- Ensuring compliance, as applicable, with:
  - Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA) (49 CFR Part 24)
  - Civil Rights requirements, including Title VI and Fair Housing regulations
  - Equal Employment Opportunity (EEO) requirements
  - Applicable procurement standards under federal regulations
  - Section 504 accessibility requirements (as applicable)
  - Complaint and grievance procedures
  - Conflict of interest standards
- Coordinating and supporting all required property acquisition activities, including appraisals, title work, negotiations, closings, and documentation.
- Supporting compliance with relocation assistance requirements for displaced persons, including documentation and reporting of benefits.
- Ensuring all required insurance coverage is established and maintained for the Project.

- Maintaining complete and accurate documentation of all Project activities, expenditures, and compliance actions in an organized system of record.
- Preparing and submitting all required financial documentation, including reimbursement requests, with proper separation of Financial Assistance (FA) and Technical Assistance (TA) costs.
- Conducting cost eligibility and documentation reviews, as needed, to ensure compliance with NRCS reimbursement requirements.
- Preparing and submitting all required reports and documentation to NRCS, including progress reports and final closeout materials.
- Establishing and maintaining official Project files in accordance with federal record retention requirements.
- Assisting the City with reimbursement requests and coordination with NRCS for the release of funds.
- Serving as the primary coordination point between the City, NRCS, property owners, and project consultants throughout the duration of the Project.

**1. PAYMENT OF SERVICES**

- a. As services are rendered by the awarded administration firm, an invoice will be submitted to the City of Burnet for review and approval.
- b. Payment of said correct invoice shall include:
  1. Date
  2. Invoice Number
  3. Itemized list of services rendered
  4. Total
- c. Payment in the form of a check shall be made per City payment policy and sent to the administration firm via check or ACH.

# BIDDERS DECLARATION

The bidder understands, agrees and warrants:

- That the bidder has carefully read and fully understands the full scope of the specifications.
- That the bidder has the capability to successfully undertake and complete the responsibilities and obligations in said specifications.
- That this bid may be withdrawn by requesting such withdrawal in writing at any time prior to the due date and time noted above **but** may not be withdrawn after such date and time.
- That the City of Burnet reserves the right to waive compliance by any applicant with any provision contained in this request whenever the City of Burnet in its sole discretion believes such waiver is in the City of Burnet's best interests.
- That by submission of this quote the bidder acknowledges that the City of Burnet has the right to make any inquiry or investigation it deems appropriate to substantiate or supplement information supplied by the bidder.
- That the accompanying bid is not the result of or affected by, any act of collusion with another person or company engaged in the same line of business or commerce, or any other fraudulent act punishable under Texas or United States law.
- The selected offeror shall:
  - Complete No Conflict of Interest
  - Submit No Boycott Forms
  - Comply with the Davis-Bacon Act (if applicable)
  - Comply with Contract Work Hours and Safety Standards Act
  - Provide Debarment and Suspension (verification via SAM.gov)
  - Submit a Byrd Anti-Lobbying Certification (if over \$100,000)

BIDDER:

Company Name: \_\_\_\_\_

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

Name Print: \_\_\_\_\_

Signature: \_\_\_\_\_

Email: \_\_\_\_\_

Date: \_\_\_\_\_

## CERTIFICATE OF NON-COLLUSION

By responding to this solicitation, the supplier understands and agrees to the following:

1. That the submitted response constitutes an offer, which when accepted in writing by the City of Burnet, and subject to the terms and conditions of such acceptance, will constitute a valid and binding contract between the undersigned and the City of Burnet; and

That the supplier has read the specifications and requirements shown or referenced in the solicitation and that the supplier's response is made in accordance with the provisions of such specifications and requirements except as expressly stated otherwise in the supplier's response; and

2. That the supplier guarantees and certifies that all items included in the supplier's response meet or exceed any and all such stated specifications and requirements of the solicitation except as expressly stated otherwise in the supplier's response; and
3. That, if awarded a contract, the supplier will deliver goods and/or services that meet or exceed the specifications and requirements of the solicitation except as expressly stated otherwise in the supplier's response, and
4. That the response submitted by the supplier shall be valid and held open for a period of \_\_\_\_\_ days (or such other time period as identified in the solicitation) from the final solicitation closing date and that the response may be held open for an additional period of time subject to the supplier's consent; and
5. That the supplier's response is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a response for the same materials, supplies, equipment, or services and is in all respects fair and without collusion or fraud. The supplier understands and agrees that collusive bidding is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards.
6. That the signatory for the bidder certifies that neither he nor the firm, corporation, partnership or institution represented by the signatory or anyone acting for the firm bidding this Project has violated the antitrust laws of this State, codified at Section 15.01, et seq., Texas Business and Commerce Code, or the Federal antitrust laws, nor communicated directly or indirectly the bid made to any competitor or any other person engaged in the same line of business, nor has the signatory or anyone acting for the firm, corporation or institution submitting a bid committed any other act of collusion related to the development and submission of this bid proposal.

DO NOT MODIFY THE BID/PROPOSAL CERTIFICATION TERMS IN ANY WAY. THIS FORM MUST BE COMPLETED, SIGNED AND SUBMITTED WITH YOUR RESPONSE.

Contractor's Full Legal Name: (PLEASE TYPE OR PRINT)	
Authorized Signature:	
Printed Name and Title of Person Signing:	
Date:	
Company Address:	
FAX Number:	
Email Address:	
*This table must be completed in its entirety by the supplier.	

## CERTIFICATE OF NON-DISCRIMINATION

In connection with the performance of work under this contract, the bidder agrees as follows:

The bidder agrees not to discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, ancestry or disability. The vendor shall take affirmative action to ensure that employees are treated without regard to their race, creed, color, sex, national origin, ancestry or disability. Such action shall include, but not be limited to the following: employment, upgrading, demotion, transfer, recruiting, or recruitment, advertising, lay-off or termination, rates of pay or other compensation and selection for training, including apprenticeship.

In the event of the bidder's non-compliance with this non-discrimination clause, the contract may be canceled or terminated by the City of Burnet. The bidder may be declared, by the City of Burnet, ineligible for further contracts with the City of Burnet until satisfactory proof of intent to comply shall be made by the vendor.

The bidder agrees to include this non-discrimination clause in any sub-contracts connected with the performance of this agreement.

BIDDER \_\_\_\_\_

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

W-9 Form

Form <b>W-9</b> (Rev. October 2018) Department of the Treasury Internal Revenue Service	<h2 style="margin:0;">Request for Taxpayer Identification Number and Certification</h2> <p style="margin:0;">▶ Go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> for instructions and the latest information.</p>	Give Form to the requester. Do not send to the IRS.
--	--	---

Print or type. See Specific Instructions on page 3.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:100%; padding: 2px;"> <b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.                 </td> </tr> <tr> <td style="width:100%; padding: 2px;"> <b>2</b> Business name/disregarded entity name, if different from above                 </td> </tr> <tr> <td style="width:70%; padding: 2px;"> <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.                 </td> <td style="width:30%; padding: 2px;"> <b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):                 </td> </tr> <tr> <td style="padding: 2px;"> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                 </td> <td style="padding: 2px;"> <input type="checkbox"/> C Corporation                 </td> </tr> <tr> <td style="padding: 2px;"> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____                 </td> <td style="padding: 2px;"> <input type="checkbox"/> S Corporation                 </td> </tr> <tr> <td style="padding: 2px;"> <input type="checkbox"/> Other (see instructions) ▶ _____                 </td> <td style="padding: 2px;"> <input type="checkbox"/> Partnership                 </td> </tr> <tr> <td style="padding: 2px;"> <input type="checkbox"/> Trust/estate                 </td> <td style="padding: 2px;"> <input type="checkbox"/> Trust/estate                 </td> </tr> <tr> <td style="padding: 2px;"> <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.                 </td> <td style="padding: 2px;">                     Exempt payee code (if any) _____                 </td> </tr> <tr> <td style="padding: 2px;"> <b>5</b> Address (number, street, and apt. or suite no.) See instructions.                 </td> <td style="padding: 2px;">                     Requester's name and address (optional)                 </td> </tr> <tr> <td style="padding: 2px;"> <b>6</b> City, state, and ZIP code                 </td> <td style="padding: 2px;">                     Exemption from FATCA reporting code (if any) _____                 </td> </tr> <tr> <td style="padding: 2px;"> <b>7</b> List account number(s) here (optional)                 </td> <td style="padding: 2px;">                     (Apply to accounts maintained outside the U.S.)                 </td> </tr> </table>	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	<b>2</b> Business name/disregarded entity name, if different from above	<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.	<b>4</b> 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"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Other (see instructions) ▶ _____	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	<input type="checkbox"/> Trust/estate	<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.	Exempt payee code (if any) _____	<b>5</b> Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)	<b>6</b> City, state, and ZIP code	Exemption from FATCA reporting code (if any) _____	<b>7</b> List account number(s) here (optional)	(Apply to accounts maintained outside the U.S.)
<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.																					
<b>2</b> Business name/disregarded entity name, if different from above																					
<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.	<b>4</b> 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"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____	<input type="checkbox"/> S Corporation																				
<input type="checkbox"/> Other (see instructions) ▶ _____	<input type="checkbox"/> Partnership																				
<input type="checkbox"/> Trust/estate	<input type="checkbox"/> Trust/estate																				
<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.	Exempt payee code (if any) _____																				
<b>5</b> Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)																				
<b>6</b> City, state, and ZIP code	Exemption from FATCA reporting code (if any) _____																				
<b>7</b> List account number(s) here (optional)	(Apply to accounts maintained outside the U.S.)																				

<b>Part I Taxpayer Identification Number (TIN)</b>													
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 <i>How to get a TIN</i> , later.													
<b>Note:</b> If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Social security number</td> </tr> <tr> <td style="text-align: center;"> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; text-align: center;">-</td> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; text-align: center;">-</td> <td style="width:40%; border: 1px solid black; height: 20px;"></td> </tr> </table> </td> </tr> <tr> <td style="text-align: center;">or</td> </tr> <tr> <td style="text-align: center;">Employer identification number</td> </tr> <tr> <td style="text-align: center;"> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; text-align: center;">-</td> <td style="width:90%; border: 1px solid black; height: 20px;"></td> </tr> </table> </td> </tr> </table>	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%; text-align: center;">-</td> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; 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:10%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; text-align: center;">-</td> <td style="width:90%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-	
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%; text-align: center;">-</td> <td style="width:25%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; 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:10%; border: 1px solid black; height: 20px;"></td> <td style="width:5%; text-align: center;">-</td> <td style="width:90%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-											
	-												

<b>Part II Certification</b>
Under penalties of perjury, I certify that:
<ol style="list-style-type: none"> <li>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</li> <li>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</li> <li>3. I am a U.S. citizen or other U.S. person (defined below); and</li> <li>4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.</li> </ol>
<b>Certification instructions.</b> 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.*