



## NEW VENDOR SET UP FORM

(PLEASE PRINT)

Vendor Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Business Fax Number: \_\_\_\_\_

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

Services Performed: \_\_\_\_\_

Labor Rate: \$\_\_\_\_\_per hour / \_\_\_\_\_ Negotiable \_\_\_\_\_ Non-Negotiable

Liability Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Liability Limits: \_\_\_\_\_ Policy Expiration Date: \_\_\_\_\_

Parts Tax Rate: \_\_\_\_\_% Labor Tax Rate: \_\_\_\_\_%

Able to accept credit card pay platform: \_\_YES \_\_NO \_\_ PREFER P.O.

### Hallcon use only:

Manager Requesting Shop Set Up: \_\_\_\_\_

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

Regional Manager Approval: \_\_\_\_\_

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

What area is this shop requested for: \_\_\_\_\_

**\*\* Please fill out completely.**

\*\* The Maintenance Department issues PO's for repairs. We can be reached at 1-800-900-5191. We are open M-F 08:00-17:30 CST.

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### **BILL PAYMENT PROCEDURES**

Hallcon maintains all preventive maintenance scheduling, maintenance repairs, and payment in house to better control and track our vehicle maintenance costs.

**Effective immediately**, you should contact the **Hallcon Fleet Department 1-800-900-5191** whenever a vehicle arrives for service or repairs, and before any work is started. You will need to provide the unit number, current odometer reading, and the list of work requested. A Purchase Order will be started at the time of your call.

An itemized estimate of the work to be performed **MUST** be approved prior to any work being started. Any subsequent increase in parts and/or labor prices must be approved before the work is performed.

After all the work is completed, you will need to call the Fleet Department to review the final details of charges. A Master Card number or a Purchase Order number will be issued at that time.

**Tow Vendors:** When a tow or road service is needed, an "authorization number" must be supplied to the vendor by the driver/supervisor requesting the service. This authorization number should include the vehicle number, date, and initials. The authorization number is then given to the Fleet Maintenance Department at the time of payment, along with the vehicle unit number, mileage, and all info related to the tow/road service.

**IMPORTANT NOTE:** No Preventive Maintenance work should be performed on the weekends or at a time when the Fleet Maintenance Department is closed without our prior knowledge. It is not necessary to give the driver any receipts.

In a continuous effort to improve our Fleet Department, any comments or suggestions are welcome. The effective use of this system will help Hallcon to maintain the vehicle records we are required to keep compliance with government regulations and will help expedite payment to you. We appreciate your cooperation in making this system effective.

### **FLEET DEPARTMENT BUSINESS HOURS**

Monday through Friday: 8:00 – 5:30 CST

14325 West 95th Street, Lenexa, KS 66215

# Request for Taxpayer Identification Number and Certification

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

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

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 <b>one</b> 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 <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ <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 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. <input type="checkbox"/> Other (see instructions) ► _____	Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
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	
or	
Employer identification number	

## 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.

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.** 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.



<b>Door Labor Rate</b>	<b>Credit Card Fee</b>
<b>Hallcon Labor Rate</b>	<b>Storage Fee</b>
<b>Hours of Operation</b>	
<b>Service Priority</b>	
<b>Number of Technicians</b>	
<b>ASE Tech Qualifications</b>	
<b>Number of Lifts</b>	
<b>Shop Equipment</b>	
<b>A/C Machines    R134a    &amp;    R1234yf</b>	
<b>Programming</b>	
<b>OK with installation of provided parts (Aftermarket &amp; LKQ)</b>	
<b>Tow Truck</b>	
<b>Body Shop</b>	
<b>Glass Repair</b>	
<b>Alignment Rack</b>	
<b>Tire Rotate    \$</b>	
<b>Tire Flat Repair    \$</b>	
<b>Diag Waved if Labor Performed</b>	

## Vehicle Maintenance Schedule

**ATTENTION:** All maintenance and repairs must be called in to the Maintenance Department and **AUTHORIZED BEFORE** the work is started. All body shop estimates must be faxed in to the Corporate Office located in Lenexa, KS and approved before any repairs can be started.

**GM vehicles have a 5 YR/100k powertrain warranty. Ford vehicles have a 5 YR/60k powertrain warranty. Chrysler/Dodge vehicles have a 5 YR/100k powertrain warranty. Toyota vehicles have a 5 YR /60K powertrain warranty. All repairs to any internal engine or transmission components within this mileage should be taken to a dealer.**

### **DAILY**

- Check Fluid Levels
- Check Tire Pressures
- Check Lights

### **EVERY 6,000-MILES**

- Change oil and filter (*5W30 for Chevrolet- 5W20 for Ford and Dodge products. 2015 model year and up GM SUVs and all Toyota vans require 0W-20 full synthetic oil.*)
- Lubricate all suspension and steering components (*When applicable*)
- Check and fill all fluid levels
- Check tire pressure

### **EVERY 12,000-MILES**

- Rotate tires and inspect Brakes. Reset TPMS system when tires are rotated.
- Get tire treads depth on all 5 tires (If applicable)

### **EVERY 30,000 MILES**

- Clean and repack front wheel bearings (*All model years Ford Econoline Vans*)
- Replace fuel filter (2008 and down Ford vehicles and 2007 and down Chevrolet vehicles only.)
- Inspect air filter/Replace as necessary.
- Inspect cabin air filter/Replace as necessary.

### **EVERY 60,000-MILES**

- Service transmission. Must use correct fluid type for vehicle application. Contact Maintenance with application questions.
- Drain and refill transfer case- AWD or 4WD vehicles.
- Change rear differential fluid (Toyota Sienna AWD model only.)
- Check front and rear axle fluid level if applicable.
- Check front and rear transfer case output shafts for play (*4WD and AWD vehicles only*)

### **EVERY 80,000-MILES**

- Replace spark plugs on Ford products- Use Original Equipment spark plugs.
- Replace spark plugs- Toyota products- Use Original Equipment spark plugs.

### **EVERY 100,000-MILES**

- Replace spark plugs on Chevrolets and Dodge/Chrysler products- Use Original Equipment spark plugs.

### **EVERY 150,000 MILES**

- Service transmission- Ford Transit- must use correct fluid type. Contact Maintenance for specification.