



Installer Information

Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Phone (Home): _____

Phone (Mobile): _____

Email Address: _____

Products You Install

1. _____
2. _____
3. _____
4. _____
5. _____

Special Certifications

1. _____
2. _____
3. _____

Days You Work: ☐ Mon ☐ Tues ☐ Weds ☐ Thurs ☐ Fri ☐ Sat ☐ Sun.



Clean Edge Flooring Inc. Certificate of Insurance Requirements

All Independent Contractors / Sub-contractors working for or on behalf of **Clean Edge Flooring Inc.** are required to maintain certain types and levels of insurance, both for the protection of **Clean Edge Flooring Inc.** employees and customers, and for the protection of the Independent Contractor / sub-Contractor.

The purpose of this letter is to advise you of the types and amounts of insurance that are required. You must obtain this insurance before beginning work for **Clean Edge Flooring Inc.** and you must maintain it for as long as you are working for, or as long as you desire to work for **Clean Edge Flooring Inc.** We cannot conduct business with those who do not carry the minimum insurance specified below:

1. _____ General Liability Insurance policy with a combined single limit of not less than \$1,000,000 for bodily injury and property damage providing coverage as follows:

\$1,000,000 Per Occurrence
\$1,000,000 Personal & Advertising Injury
\$2,000,000 General Aggregate
\$2,000,000 Products & Completed Operations Aggregate
2. _____ Automobile Liability Insurance policy with a combined single limit of not less than \$1,000,000 for bodily injury and property damage. Coverage should include protection for owned automobiles, non-owned automobiles, and hired automobiles.
3. _____ Workers' Compensation Insurance which conforms to the laws of the state of the worksite. The Employer's Liability Limit shall be no less than \$500,000.
4. _____ A Waiver of Subrogation and Additional Insured status in favor of Trinity Flooring, Inc. shall be provided on all required policies. Additional Insured Status will not be required for Workers' Compensation but a Waiver of Subrogation in favor of Clean Edge Flooring Inc. will be.

A certificate of insurance showing coverage and the additional insured designation /waivers shall be furnished to Clean Edge Flooring Inc. by the Independent Contractor / Sub-contractor prior to performance of any work under this contract.

This certificate of insurance shall include an endorsement providing at least thirty (30) days will use notice to Clean Edge Flooring Inc. prior to cancellation, reduction, or any change in such coverage. Should you have any questions, please contact Moises Morales (503) 858-0882

ADDITIONAL INSURED VERBAGE FOR CERTIFICATE:

Clean Edge Flooring Inc
Attn: Moises Morales
5285 NE Elam Young Pkwy Ste A400
Hillsboro Oregon 97124

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	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. See also *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:

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.

Sign Here	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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



**Clean Edge Flooring Inc.
Installer Checklist**

Getting Started.....

1. Inspect Materials to verify quantities and products picked up are the same as what is on the Clean Edge Flooring Inc. work order. **Once these materials are signed for, they are the responsibility of the installer. The installer is liable for proper delivery and installation.**

Upon Arriving at Site.....

1. Walk through the site and review all projected measurements and review the work order to ensure those materials on job are sufficient to complete work.
2. Call Installation Scheduler and inform him/her of any shortages or other needs for re-orders immediately upon discovery of shortage or damage.
3. If job is delayed and will take longer than projected, call Installation Scheduler to inform of projected time of completion ASAP. On multi-day installations, start on the first day of the schedule. Call the office each morning and give status update to the Installation Scheduler.
4. If the homeowner or builder requests any additional work not on the works order, or if any additional work is required in order to complete the job, call the Installation Scheduler immediately. The scheduler will call the salesperson who will confirm the work with the customer and any increased charges to be incurred.

Upon Completion.....

1. Clean up after yourself and/or your crew. Pick up extra pieces, vacuum on retail, haul out any trash, lunch debris, etc.
2. On new construction sites, one piece of tile per area and remaining grout(s) or caulk(s) should be left next to the furnace in the garage (or as directed). One scrap of vinyl and carpet should be rolled up and left in the closet under the staircase or in the garage (or as directed). On retail jobs, leave products with the customer as requested.

Installer Signature

Date.



Construction Contractors Board

Regulations for Filing = Warranty of Work

Section 701.143

5. Except as otherwise provided in this section, if a licensed contractor files the claim against the licensed contractor performing the work as a subcontractor on a new structure, the board must receive the claim no later than the earlier of:
 - (a) Fourteen months after the date the structure was first occupied; or
 - (b) Two years after substantial completion of the structure.
6. Except as otherwise provided in this section, if a licensed contractor files the claim against the licensed contractor performing work as a subcontractor on an existing structure, the board must receive the claim no later than 14 months after the date the work on the structure was substantially completed.

Installer Signature

Date