



VILLAGE OF ROYAL PALM BEACH, FLORIDA

**Finance Department 1050 Royal Palm Beach Blvd. Royal Palm Beach,
Florida 33411 Telephone (561) 790-5194 Fax (561) 790-5174
Att: Lou Hosford**

COMPANY NAME _____

Parent Co. Name: _____

REMITTANCE ADDRESS:

CITY: _____ STATE: _____ ZIP: _____

Name of Contact Person: _____

Phone Number: _____ FAX Number: _____

Email Address: _____

Employer I.D. Number (E. I. N.) OR Social Security Number

Is your Company Incorporated? () YES () NO
If YES please, send proof of Incorporation and copy of W9 Form

Are you a Tax Exempt Organization? () YES () NO

Tax Exempt Number: _____

If your company is providing a Service within the Village City limits, complete the following information:

Contractor's License No. _____

County Business Tax Receipt _____

Village of RPB Business Tax Receipt _____

Liability Ins. Carrier Name: _____

Insurance Policy No. _____

Please complete and return ASAP. Your Company can not be added to our Accounts Payable Vendor files nor can checks be issued until this information is received by the Finance Department. If you need additional information, please call the Finance Department – Accounts Payable at: (561) 790-5111 or (561) 790-5194.

Date: _____

Company Authorized Signature