



Welcome New Vendor!

Thank you for visiting our website and deciding to apply to become an approved vendor with BW Phillips Management Group, Inc.

The purpose of this process is to streamline and make efficient the laborious task of identifying qualified vendors for our properties, clients and staff members. This process enables us to pre-qualify your company by obtaining the following important pieces of information:

1. Capabilities, qualifications and references
2. 24 hour telephone answering/Emergency response (as necessary)
3. Geographic area served
4. Services offered
5. Insurance
6. W-9 information

In addition, we are evaluating your company's ability to work with the latest technology. We will ask for the following:

1. Email address
2. Website URL
3. Payment options available (credit card, auto debit, etc.)

The above will be considered minimum requirements to apply. If you do not have an email address or a website, we are sorry but we cannot consider your application. If you have an email address, but are in the process of developing a website, we will consider your application, depending on the service or supply you offer. Remit the New Vendor Package back to us via:

1. Email to accountingdept@bwphillips.com as a .pdf file attachment (preferred)
- or
2. Fax to our *EDM #708-589-3390

We look forward to receiving your application. To proceed with the process, complete and return the forms on the following pages.

Thank you.

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com
I:\Corporate\Forms\Forms - New Vendor Package\NEW VENDOR SINGLE FORMS MS WORD FOR PACKETS\01 Welcome New Vendor Introduction.doc
*EDM # = Electronic Document Management. All documents faxed to this # are converted to .pdf and stored electronically on our file servers.

BW Phillips

IMPORTANT

TO: All Vendors

FROM: BW Phillips Management Group, Inc. as Agent for _____
(Insert Property Name/Number Here)
17450 South Halsted, #300
Homewood, IL 60430-2041

All invoices must be addressed to the appropriate building as noted above. In addition, all invoices/packing slips must include a purchase order number or the invoice will be returned to you for re-submittal with a purchase order number reference.

NO ORDERS MAY BE ACCEPTED WITHOUT A PURCHASE ORDER.

Address all bills as follows:

BW Phillips Management Group, Inc.
as agent for _____
(Insert Property Name and Property #)
17450 South Halsted, Suite 300
Homewood, IL 60430-2041

Please note that any order placed should be followed up with a written purchase order. We strongly recommend that you NOT process the invoice unless you have received either:

A) a written copy of the purchase order

or

B) the purchase order number

We want to process your invoices as quickly and efficiently as possible. Your adherence to this system will enable this to occur.

Thank you.

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com



Vendor Pre-Qualification Form*

Company Name	
Contact Name	
Address	
City	State
	Zip
Telephone	

Indicate the after-hours emergency telephone number if different from above:

After-hours Emergency Number/ Pager	
Fax	

Email address	
---------------	--

Website address	
-----------------	--

Client References: Please enclose a written letter of reference for each name below.	
1.	Company Name Business Type
Contact Name	
Telephone	
2.	Company Name Business Type
Contact Name	
Telephone	
3.	Company Name Business Type
Contact Name	
Telephone	
List any trade associations, licenses held?	
How long in business?	

Office Use Only

- Vendor References Verified.
- Insurance Coverages and Limits Comply.
- Vendor has an after-hours emergency contact system in place as required for the trade.
- Vendor has the proper licenses as required for the trade.

Approved: _____

Date: _____

Check One:	(✓)
Corporation	
Limited Liability Company	
Sole Proprietor	

MANDATORY – ALL BOXES BELOW MUST BE CHECKED IN ORDER TO BE CONSIDERED!

Check Compliance with Insurance Requirements

Coverage	Minimum Limit Required	(✓)
Comprehensive/ Commercial General Liability-General Aggregate	2,000,000	<input type="checkbox"/>
Comprehensive/ Commercial General Liability-Products- Complete Operations	1,000,000	<input type="checkbox"/>
Comprehensive/ Commercial General Liability-Personal & Advertising Injury	1,000,000	<input type="checkbox"/>
Comprehensive/ Commercial General Liability-Each Occurrence	1,000,000	<input type="checkbox"/>
Comprehensive/ Commercial General Liability-Excess Liability	1,000,000	<input type="checkbox"/>
Comprehensive/ Commercial General Liability-Fire Damage (any one fire)	50,000	<input type="checkbox"/>
Comprehensive/ Commercial General Liability-Medical Expense	5,000	<input type="checkbox"/>
Automobile Liability- Combined single limit	1,000,000	<input type="checkbox"/>
Workers Compensation and Employer's Liability-Each accident	500,000	<input type="checkbox"/>
Workers Compensation and Employer's Liability-Disease	500,000	<input type="checkbox"/>
Workers Compensation and Employer's Liability-Disease each employee	500,000	<input type="checkbox"/>

*Form must be filled out in its entirety.

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com



To: All Vendors

From: Linda Day, President
BW Phillips Management Group, Inc.

Re: Continuing Contracts/Certificates of Insurance

Effective immediately with our newly merged entities of BW Phillips Management Group, Inc. and BW Phillips Realty Partners, LLC, all continuing contract service vendors need to supply a contract which outlines the service performed, the frequency of the service and the cost of the service. Our merged entity name will be BW Phillips Management Group, Inc.

The contracts, therefore, please note that all contracts must be made out as follows:

BW Phillips Management Group, Inc.
As agent for "**Property Name/Address/Property #**"

We will use your service contract as an attachment to our form Continuing Contract agreement. Once we have the necessary information complete, we will provide you with a completed Continuing Contract agreement, along with a PO/Contract # for your review and execution.

Also required, is a certificate of insurance which should comply with the guidelines reflected on the attached. If you have any questions, please contact our Corporate Administrator, at 312 or 708-957-2400.

Your assistance is greatly appreciated while we update our records.

Thank you.

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com
I:\Corporate\FORMS\FORMS - New Vendor Package\NEW VENDOR SINGLE FORMS
MS WORD FOR PACKETS\04 Vend CC Agreement Rqst.doc



RE: New Vendor Certificate of Insurance Request

Dear Vendor:

BW Phillips Realty Partners, LLC and BW Phillips Management Group, Inc. requires that any vendor, prior to performing services at any of our offices or a property we manage, provide a *Certificate of Insurance* as evidence of the following coverage and minimum limits:

Comprehensive/Commercial General Liability:

General Aggregate	\$2,000,000
Products-Completed Operations	\$1,000,000
Personal & Advertising Injury	\$1,000,000
Each Occurrence	\$1,000,000
Excess Liability	\$1,000,000
Fire Damage (<i>any one fire</i>)	\$ 50,000
Medical Expenses	\$ 5,000

Automobile Liability:

Combined single limit of \$1,000,000
Uninsured motorist \$1,000,000

Workers Compensation and Employer’s Liability:

\$500,000 each accident
\$500,000 disease - policy limit
\$500,000 disease - each employee

In the event you service more than one property managed by BW Phillips Realty Partners, LLC, or BW Phillips Management Group, Inc. you may list all properties on an attached endorsement sheet provided by your insurance carrier with your certificate. Enclosed please find a list of the properties you may service. The property must be identified as shown, along with BW Phillips Realty Partners, LLC and BW Phillips Management Group, Inc. and all parties **MUST BE NAMED** as Additional Insured with respect to General Liability on the Certificate (please note that each property must be insured for the amounts shown above).

The certificate must be an original. All insurance providers must maintain an A.M. Best rating of A- VII or better and this rating must be evidenced on the *Certificate of Insurance*. Any Certificates that do not meet the mentioned criteria will not be accepted. If this occurs, we regret we cannot allow your employee access to the building to perform any work. BW Phillips Realty Partners, LLC must be afforded 30-day prior notice in the event of any material change, cancellation or non-renewal (*10 days in the event of non-payment of premium*). If there are any questions, please contact our Corporate Administrator at (312 or 708-957-2400).

We are also enclosing an Insurance Coverage checklist that **MUST be completed by your Agent** and returned to us along with the Certificate(s) of Insurance to fax 708-589-3390 or via email to accountingdept@bwphillips.com. Your immediate attention is appreciated.

Very truly yours,

BW PHILLIPS REALTY PARTNERS, LLC

Corporate Administrator

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com
I:\Corporate\Forms\Forms - New Vendor Package\NEW VENDOR SINGLE FORMS
MS WORD FOR PACKETS\05 COI Vendor Request Letter.doc



Date: _____ Vendor Name: _____

Property Name/Property Address: _____

Dear Agent:

It is imperative that you complete this form and return it to us along with your client's Certificate of Insurance.

BW Phillips Management Group, Inc. and BW Phillips Realty Partners, LLC and the Property Owners require that the following **must be provided** on all Certificates of Insurance. Please check the Client Coverage box to the right if your client has the appropriate Limit/Requirement.

Coverage/Requirement	Limit/Requirement	Client Coverage
Comprehensive/Commercial General Liability-General Aggregate	2,000,000	<input type="checkbox"/>
Comprehensive/Commercial General Liability-Products-Complete Operations	1,000,000	<input type="checkbox"/>
Comprehensive/Commercial General Liability-Personal & Advertising Injury	1,000,000	<input type="checkbox"/>
Comprehensive/Commercial General Liability-Each Occurrence	1,000,000	<input type="checkbox"/>
Comprehensive/Commercial General Liability-Excess Liability	1,000,000	<input type="checkbox"/>
Comprehensive/Commercial General Liability-Fire Damage (any one fire)	50,000	<input type="checkbox"/>
Comprehensive/Commercial General Liability-Medical Expense	5,000	<input type="checkbox"/>
Automobile Liability- Combined single limit	1,000,000	<input type="checkbox"/>
Workers Compensation and Employer's Liability-Each accident	500,000	<input type="checkbox"/>
Workers Compensation and Employer's Liability-Disease	500,000	<input type="checkbox"/>
Workers Compensation and Employer's Liability-Disease each employee	500,000	<input type="checkbox"/>
Additional Insured Owner		<input type="checkbox"/>
Additional Insured Management Company	BW Phillips Management Group, Inc. and BW Phillips Realty Partners, LLC as agents	<input type="checkbox"/>
Original Certificate Received	Require Original	<input type="checkbox"/>
Insurance Provider Rating	A.M. Best rating of A-VII or better	<input type="checkbox"/>
30 day notice prior to cancellation or material change or non-renewal (10 days in the event of non-payment)	Require notification on certificate.	<input type="checkbox"/>

Agent Name: _____

Phone No: _____

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com

I:\Corporate\Forms\Forms - New Vendor Package\NEW VENDOR SINGLE FORMS MS WORD FOR PACKETS\06 Ins Agent Coverage Checklist.DOC



Dear Vendor:

In order for us to process your invoice, please complete the attached W-9 form and return it to us.

You may fax this form to (708)589-3390 or email to accountingdept@bwphillips.com.

Very truly yours,

BW PHILLIPS MANAGEMENT GROUP, INC.

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com

I:\Corporate\Forms\Forms - New Vendor Package\NEW VENDOR SINGLE FORMS
MS WORD FOR PACKETS\07 VENDOR W-9 Cover Letter.DOC

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester, or
2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
3. The IRS tells the requester that you furnished an incorrect TIN, or
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

Exempt payees. Backup withholding is not required on any payments made to the following payees:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt recipients except for 9
Broker transactions	Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt recipients 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt recipients 1 through 7 ²

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

²However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a Federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov/online/ss-5.pdf. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses/ and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
5. Sole proprietorship or single-owner LLC	The owner ³
For this type of account:	Give name and EIN of:
6. Sole proprietorship or single-owner LLC	The owner ³
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

BW Phillips

Vendor Information Form

Company Name	
Address, Suite, City, State, Zip (Correspondence)	
Address, Suite, City, State Zip (Remittance Only)	
Contact Name	
Contact E-mail address	
Office Telephone Number	
Cell Phone Number	
Website Address	
After hours emergency contact person/ phone number/ pager or special instructions.	
Fax Number	
If more than one contact, please enter alternate information here	
Payment Methods (check options)	<input type="checkbox"/> Credit card-VISA <input type="checkbox"/> Auto Debit/EFT <input type="checkbox"/> Check Only <input type="checkbox"/> Check by phone

RETURN VIA FAX TO: 708-589-3390 OR Email to accountingdept@bwphillips.com