



VENDOR SET-UP REQUEST CHECKLIST

To be Completed by Department:

The following forms must be completed and submitted to Finance - Purchasing Department, arodriguez@nbvillage.com in order for a Vendor to be added in the Tyler system.

Vendor W-9 Form*

<https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Copy of Verification of Vendor records printed from

<https://dos.myflorida.com/sunbiz/search/>

E-verify Affidavit*

Copy of Vendor Current Business License

Electronic Funds Transfer (EFT) Vendor banking information Form (if applicable)

[EFT FORM](#)

Proof of Insurance / Certificate of Insurance*

*Mandatory Requirements for Vendors

1. For Vendors who come onto Village property, or on property where we direct them to go, Vendors will need **ALL** of the following insurances.
2. For Vendors who otherwise do work or provide goods or services for the Village but do not come onto Village property, or on property where we direct them to go, Vendors will need at **A MINIMUM** General Liability coverage. Some vendors, particularly those that are providing services, may also need Professional/E&O Liability Coverage. Finance will determine the coverages necessary prior to Vendor approval.



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For all vendors who will be on Village property at any point in their engagement, the following insurance policies must be received **PRIOR TO** execution of any contract, agreement, or purchase. Vendors should be made aware of these requirements when you are securing bids, quotes, or have spoken with them to do any work for the Village:

General Liability: \$1,000,000/\$2,000,000 with the North Bay Village named as an additional insured.

Professional Liability: same as above, but only required for certain services. Please check with Finance to determine if this is required of your vendor. This policy will be a Certificate of Insurance with the Village named as a Certificate Holder. The Village should NOT be an additional insured.

Automobile: \$1,000,000 with all autos OR scheduled autos with hired and non-owned autos added and with the North Bay Village named as an additional insured.

Workers Compensation: \$500,000 minimum limits.

Exemption certificates are not acceptable. They do not insure the Village. This policy will be a Certificate of Insurance with the Village named as a Certificate Holder.

The address for the Village that appears on the Certificate of Insurance is to be as follows:

**North Bay Village
Attn: Finance Department
1666 Kennedy Causeway
North Bay Village, FL 33141**

If a business or consultant cannot provide ALL of the coverages noted above, they cannot do any work for the Village that requires them to be on Village property.

Should we receive a notice of cancellation of coverage from the insurance company, we will notify the Department. In the event of cancellation, the vendor will be terminated as of the cancellation date.



NORTH BAY VILLAGE
EST. 1945

E-VERIFY AFFIDAVIT

In accordance with Section 448.095, Florida Statutes, the Village requires all contractors doing business with the Village to register with and use the E-Verify system to verify the work authorization status of all newly hired employees. The Village will not enter into a contract unless each party to the contract registers with and uses the E-Verify system.

The contracting entity must provide of its proof of enrollment in E-Verify. For instructions on how to provide proof of the contracting entity’s participation/enrollment in E-Verify, please visit: <https://www.e-verify.gov/faq/how-do-i-provide-proof-of-my-participationenrollment-in-e-verify>

By signing below, the contracting entity acknowledges that it has read Section 448.095, Florida Statutes and will comply with the E-Verify requirements imposed by it, including but not limited to obtaining E-Verify affidavits from subcontractors.

Check here to confirm proof of enrollment in E-Verify has been attached to this Affidavit.

In the presence of:

Signed, sealed and delivered by:

Witness #1 Print Name: _____

Print Name: _____

Witness #2 Print Name: _____

Title: _____

Entity Name: _____

ACKNOWLEDGMENT

State of Florida

County of _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, 20____, by _____ (name of person) as _____ (type of authority) for _____ (name of party on behalf of whom instrument is executed).

Notary Public (Print, Stamp, or Type as
Commissioned)

- _____ Personally known to me; or
- _____ Produced identification (Type of Identification: _____)
- _____ Did take an oath; or
- _____ Did not take an oath



(EFT) ELECTRONIC FUNDS TRANSFER FORM

Dear Vendor:

North Bay Village strives to maintain a streamlined vendor payment process which will allow our vendors to be paid in a timely manner.

Our goal is to pay our vendors by EFT Electronic Funds Transfer to ensure speed and security. Please provide the following banking information:

Select One:

Checking Account

Savings Account

Bank Name: _____

Routing Number: _____

Account Number: _____

Name(s) on the Account: _____

NAME (PRINT): _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

TITLE: _____

ENTITY/COMPANY: _____

DATE: _____ Signature: _____

Once completed, please email form to: ap@nbvillage.com

1666 Kennedy Causeway, Suite 300
North Bay Village, FL 33141
(305)76-7171