



# Contractor's I-9 Form

Before we are able to authorize payment for services performed by independent contractors, we are required by the Internal Revenue Service to have certain information on file. Please respond to the following and return this letter to us in the enclosed envelope:

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: ( ) work ( ) cell ( ) home  
 FAX: ( )

Please check type of business entity:

Individual  Corporation   
 Sole Proprietor  Government Agency   
 Partnership  Other(please specify): \_\_\_\_\_

Please provide tax identification number:

Social Security Number: \_\_\_\_\_

Employer Identification Number \_\_\_\_\_

**PLEASE NOTE:** If you are a Sole Proprietor, you are required to provide the owner's name and social security number:

Business Name: \_\_\_\_\_ EIN: \_\_\_\_\_  
 Owner's Name: \_\_\_\_\_ SSN: \_\_\_\_\_

**CERTIFICATION--** Under penalties of perjury, I certify that the number shown on this form is my/my company's correct taxpayer identification number.

\_\_\_\_\_  
*Signature* \_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Title*

<p><b>If you have any questions, please contact the appropriate location:</b>  <i>Chabot-Las Positas Community College District Office</i>          5020 Franklin Avenue, Pleasanton CA 94588,          (925) 485-5288</p>	
<p><i>Chabot College</i>          25555 Hesperian Boulevard, Hayward CA 94545          (510) 723-7681</p>	<p><i>Las Positas College</i>          3033 Collier Canyon Road, Livermore CA 94551          (925) 373-4994</p>