

**CITY OF CEDAR RAPIDS  
Engineering Department**

**Storm Sewer Payor Registration and Notification**

**Instructions: Please Type or Print.**

Name(s) {as it is to appear on check}:		
Number and Street {where check to be mailed}:		Apt. No.
City	State	Zip Code

**TAXPAYER IDENTIFICATION NUMBER (TIN) AND CERTIFICATION**

Enter your TIN in the appropriate box. For individuals and sole proprietors, this is your social security number. For other entities, it is your employer identification number. The TIN is required for IRS 1099 reporting purposes. Please note that payments will not be issued without a TIN on file.		
Type of Organization (If other, specify type in blank provided.) <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____		If incorporated, in which state?
Enter name as it appears on social security card or employer identification:	The number shown on this form is my correct taxpayer identification number.	
	Social Security	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Have you done business <b>under this name</b> with the City of Cedar Rapids previously? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Identification Number	<input type="text"/> <input type="text"/> - <input type="text"/>
	Are you exempt from backup withholding or 1099 reporting? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Please Sign Here</b>	Signature	Date