

Please Read Carefully

Dear New Vendor:

Our goal at EJH Construction, Inc. is to provide our customers with the highest level of quality workmanship within the industry. As an EJH Subcontractor, you are an extension of our team and we take pride and integrity in the outcome of the work we produce. With your cooperation, we are certain you will be an invaluable addition to our team.

Enclosed is our **New Vendor Information Packet**. Please complete the required information and return to us as soon as possible along with a list of references so that we have all of the information necessary to set you up in our database.

State law requires that we have a current Certificate of Insurance on file, stating Workman's Compensation <u>and</u> General Liability coverage (a SAMPLE certificate outlining minimum coverage amounts is attached hereto for your convenience). EJH Construction, Inc. must always be listed as an **Additional Insured**. Without a current Certificate of Insurance on record, **payments will be delayed** until a current form is received. Please advise your insurance agent to ANNUALLY forward this information to:

EJH Construction, Inc.
30896 W. Eight Mile Road
Farmington Hills, MI 48336
Fax to (248) 478-3400 or
Email to accounting@ejhconstruction.com

If you are the sole employee of the company and are not required to carry Workers Compensation, the State of Michigan requires you to complete out an *Independent Contractor's Statement*. This form can be obtained by contacting the EJH Contract Manager at (248) 478-1400.

EJH encourages electronic transmittal of all invoices. Please send to accounting@ejhconstruction.com for expediting of payment processing. All invoices must have a P.O. # and Job # clearly stated on your invoice. Please review page 2 for the proper Billing Processes. EJH is unable to process payment for invoices billed after 180 days from the date of your completion.

We look forward to working with you and establishing a mutually rewarding relationship.

Sincerely,

EJH Construction, Inc.

Management

Enclosures



BILLING PROCESSES:

Subcontractor Invoices \$5,000.00 and over MUST be in A.I.A. Billing Format

(YOU MAY REQUEST AN AIA "TEMPLATE" IF NEEDED)

The following information is REQUIRED on your invoices:

- 1. **Job name and number** (provided by EJH)
- 2. **EJH Project Manager**'s name assigned to the project
- 3. **Job address with city** (provided by EJH)
- 4. **P.O. number** and amount for the services rendered (provided by EJH)
- 5. Your company's invoice number
- 6. Description of work / service
- 7. **Invoice date** (the invoicing should reflect the completion date or period ending)
- 8. **Date(s) worked**, including last day worked (applicable for sub-contractors)
- 9. **EJH Subcontract Agreement** (subcontracts are issued for values of \$5,000.00 or more)
- 10. **AIA Billing Formats** are mandatory for Subcontractor Invoices of **\$5,000.00 or more**. They must reflect the current amount of your contract, with a **BREAKDOWN of LABOR vs. MATERIAL** costs, any changes to the base contract and % of work complete. (If you are unable to accurately provide this billing format and EJH must complete the documents on your behalf, a minimum charge of \$100.00 will apply).
- 11. **10% retention on** Subcontractor invoices in excess of \$3,000 will be automatically withheld (for up to 30 days after completion, or until any Punch List item are completed and/or all Warranty Documents are submitted).
- ➤ Your EJH's Project Manager will provide you with items #1-4.
- > Original invoices (mail, fax, or electronic) must be sent to the Accounting Department. Electronic invoices should be sent to: accounting@ejhconstruction.com.
- Expiration or cancellation of your General Liability or Workman's Comp Insurance will delay payment until the matter is resolved.
- Invoices exceeding an EJH Purchase Order agreed amount will <u>not</u> be processed until the assigned Project Manager has authorized the increase in writing.
- > Invoices not billed within 180 days from date of completion will not be processed for payment.
- > EJH will supply Waivers of Lien for each payment. They must be signed and mailed back immediately.
- > Sworn Statements and supplier waivers must be included with all Progress Billings.
- > Payment Terms: Within 30 days after receipt of all required documentation (unless otherwise noted).

An Accelerated Payment Program is available for Subcontractors/Suppliers offering an early payment discount. Please inquire with EJH's Contract Manager.

Invoices will not be processed until all information is complete and accurate.

Missing information will delay the payment process.



SUBCONTRACTOR GUIDELINES

In order to keep jobs running smoothly, all subcontractors must adhere to the following guidelines:

1. **SAFETY**

As part of our Safety Program and compliance on your part, there are requirements you must abide by in order to perform work on our jobsites. All OSHA requirements must be met. All insurance and safety compliance forms must be at our corporate office before starting work. Each Subcontract Agreement will contain a checklist that must be signed for each project you are awarded and returned to EJH Construction, Inc.'s office. It is MANDATORY that Hard hats and safety gear are worn at all times.

2.	SC	SCHEDULING/COMMUNICATION				
		All client meetings should be handled and scheduled by an EJH Project Manager. Notify the Project Managers of any material delivery time table. Confirm with the Project Manager starting and completion date. Notify the Project Manager of known and/or possible violations that are present and solutions on how to handle properly. Notify the Project Manager of date/time for city inspection of rough and final approval. Obtain written confirmation of your city inspections. Direct all questions and concerns from the customer to the EJH Project Manager.				
3.	PROTOCOL					
		Please use drop cloth and runners from door to work area. Smoking is not permitted on EJH Construction job sites. Your workmanship is limited to the trade you employ. Comments concerning other trades should be communicated to the EJH Project Manager. Negative comments to customers about other trades or EJH personnel will not be tolerated and may result in the termination of the agreement. Identification of crew leaders is important for the customer and EJH Construction. Do not ask customers for tools, brooms, trashcans, etc. Ask customer for permission to enter any area not in the scope of work areas. Do not drive across, park on or leave wheels on any lawn and/or landscape areas. If your vehicle is leaking fluid, do not park on job site. Any site corrections necessary resulting from your vehicles will be charged back to you. MAKE SURE THE BUILDING IS SECURE if you are the last one to leave.				
4.	CHANGES, ADDITIONAL WORK and MATERIAL SELECTION					
_		An updated or new Purchase Order / Change Order will be issued by an EJH Project Manager should the scope of work be changed during a project. Any changes or additional work performed without prior written authorization from EJH Construction, Inc. will not be paid for.				
5.	SA	ALVAGE				

30896 W. 8 Mile | Farmington Hills | MI | 48336 | W 800.854.4534 | F 248.478.3400 www.ejhconstruction.com

Small items such as hardware, bath accessories, decorative cover plates, etc., shall be labeled and placed in a container provided by EJH Construction. If one is not on site, please ask the Project

Manager for one.



		Larger items shall be labele	ed, protected and placed in agreed location on site or taken to an agreed
	_	warehouse.	, i a contraction in the contraction of the contrac
3.	<u>Cl</u>	<u>-EAN-UP</u>	
		All trades are responsible f trailer (including lunch debi If dumpster or trailer is not garbage bags or boxed on Larger items i.e.: furniture Do not fill dumpster or traile	on site, trades are responsible for their debris to be swept and placed in
		ad the outlined requireme ocedures and payment gu	nts and agree to adhere to EJH Construction, Inc.'s policies, safetyidelines.
Date			Company Name (Please Print)
Phon	ie #		Cell #
Street Address			Fax #
City,	Sta	te, Zip	Email Address
Owne	er's	Name (Please Print)	Signature
State	Lic	ense Number:	Type of License:
ssuing State:			Expiration Date:
_ist Y	'our	Trades/Specialties:	
Abilit	y to	Travel?:Yes	No (if Yes, within miles of mailing address)
Current Number of Employees			Estimated Annual Sales: \$
"Plea	se p	rovide the EJH Representativ	/e's Name whom requested this information:



CERTIFICATION OF IRCA COMPLIANCE

I,, (Name of Authorized Officer of Subcontractor) hereby certifies on behalf of
, the "Company", the following: (Legal Name of Organization)
(Legal Name of Organization)
 That it has verified and will continue to verify the eligibility of each and every worker it has assigned and will continue to assign to work on any EJH Construction, Inc. Project;
 That proper and complete I-9 documentation has been and will be completed for each and every worker assigned to work on an EJH Construction, Inc. Project;
That all the workers assigned by the Company to work on any EJH Construction, Inc. Project is legally authorized to work in the United States; and
4. That in the event that it becomes known to the Company that a worker assigned to work on an EJH Construction, Inc. Project is no longer authorized to work in the United States, the Company will immediately remove that worker from assignment.
Name of Authorized Officer of the "Company:
Signature of Authorized Officer of the "Company"
Date:

Form W-9
(Rev. December 2014)
Department of the Treasury

• Form 1099-S (proceeds from real estate transactions)

• Form 1099-K (merchant card and third party network transactions)

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Internal	Revenue Service	187.94						
	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.							
Print or type Specific Instructions on page 2.	2 Business name/disregarded entity name, if different from above							
	3 Check appropriate box for federal tax classification; check only one of the f Individual/sole proprietor or C Corporation S Corporation Single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S Note. For a single-member LLC that is disregarded, do not check LLC; cline tax classification of the single-member owner.	on Partnership Trust/estate certain instructions. P=partnership) Exempleck the appropriate box in the line above for			emptions (codes apply only to in entities, not individuals; see actions on page 3): upt payee code (if any)			
ř ž	☐ Other (see instructions) ▶		code (if any	y) ounts maintained or	utside the Li	ISI		
말	5 Address (number, street, and apt. or suite no.)		ster's name and address (optional)					
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See S	6 City, state, and ZiP code							
	7 List account number(s) here (optional)		·					
Par	t I Taxpayer Identification Number (TIN)							
Enter	your TIN in the appropriate box. The TIN provided must match the nar	me given on line 1 to avo	id Social secu	urity numb	er			
reside entitle	p withholding. For individuals, this is generally your social security nurent alien, sole proprietor, or disregarded entity, see the Part I instructions, it is your employer identification number (EIN). If you do not have an page 3.	ns on page 3. For other	а] -	_			
	• •	1 amal Alam Alama	Or Employer i	dentification	an number		7	
guidel	If the account is in more than one name, see the instructions for line times on whose number to enter.	and the chart on page 4	Tor Employer		THOUSE TO SERVICE THE PROPERTY OF THE PROPERTY	_	1	
_			-	·				
Parl	t II Certification			<u>, , , , , , , , , , , , , , , , , , , </u>			<u></u>	
	penalties of perjury, I certify that:							
1. The	e number shown on this form is my correct taxpayer identification num	nber (or I am waiting for a	number to be iss	ued to me); and			
Ser	 I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 							
3. I ar	m a U.S. citizen or other U.S. person (defined below); and							
4. The	FATCA code(s) entered on this form (if any) indicating that I am exem	pt from FATCA reporting	is correct.					
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.							d	
Sign Here		Date	e >					
Gen	eral Instructions	Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)						
	references are to the Internal Revenue Code unless otherwise noted.	• Form 1099-C (canceled debt)						
	developments. Information about developments affecting Form W-9 (such station enacted after we release it) is at www.irs.gov/fw9,	 Form 1099-A (acquisition or abandonment of secured property) 						
_	ose of Form	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN,						
return v	vidual or entity (Form W-9 requester) who is required to file an information with the IRS must obtain your correct taxpayer identification number (TIN)	If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.						
numbe	may be your social security number (SSN), individual taxpayer identification r (ITIN), adoption taxpayer identification number (ATIN), or employer cation number (EIN), to report on an information return the amount paid to	By signing the filled-out form, you: 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be insued).						
	other amount reportable on an information return. Examples of information include, but are not limited to, the following:	to be issued), 2. Certify that you are not subject to backup withholding, or						
	1099-INT (interest earned or paid)	3. Claim exemption fro	m backup withholdir	ng if you are	a U.S. exem			
	1099-DIV (dividends, including those from stocks or mutual funds) 1099-MISC (various types of income, prizes, awards, or gross proceeds)	applicable, you are also certifying that as a U.S. person, your allocable share any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, a				the		
• Form brokers	1099-B (stock or mutual fund sales and certain other transactions by	4. Certify that FATCA of	. Certify that FATCA code(s) entered on this form (If any) indicating that you are mpt from the FATCA reporting, is correct. See What is FATCA reporting? on					

page 2 for further information.

ACCORD		CERTIFICATE OF LIA	ABILITY INS	SURANCE	DATE (MM/DD	/YY)	
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	SAMPLE						
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				L.	HE POLICES BELOW.		
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ATTENTIO	N:	EXT:		COMPANY A	TO BE DETERMINED		
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INSURED:	: SUBCONTRACTOR NAME (SUBCONTRACTOR ADDRESS SUBCONTRACTOR ADDRESS	•		COMPANY C			
COVERAG							
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	(X) COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP/AGG	\$2,000,000	
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Α	OWNERS & CONTRACTORS PROT	*****	00/00/00	00/00/00	FIRE DAMAGE (ANY ONE FIRE)	\$50,000	
					MED EXP(ANY ONE PERSON)	\$50,000	
AUTOMOBILI	E LIABILITY						
	(X) ANY AUTO				COMBINED SINGLE LIMIT	\$1,000,000	
Α	ALL OWNED AUTOS	XXXXX	00/00/00	00/00/00	BODILY INJURY (PER PERSON) BODILY INJURY (PER ACCIDENT)		
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	S COMPENSATION AND EMPLOY	ERS' LIABILITY	00/00/00	00/00/00	WC STATUTORY LIMITS OTHER		
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	EXCL				EL DISEASE-EACH EMPLOYEE	\$1,000,000	
OTHER							
			00/00/00	00/00/00	PER PROJECT		
DESCRIPT	TION OF OPERATIONS/LOCATION	S/VEHICLES/SPECIAL ITEMS					
PROJECT:							
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PRIMARY .	ADDITIONAL INSURED AS RESPE	ECT TO GENERAL LIABILITY:	EJH Construc	ction, Inc.			
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CERTIFICA	ATE HOLDER		CANCELL		DIDED DOLLOIS DE CANOSI ES SESSES TITE		
EJH Construction, Inc.			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL				
30896 W. 8 Mile Road			30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,				
Farmington Hills, MI 48336			BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY				
			OF ANY KIND U	IPON THE COMPANY,	IT'S AGENTS OR REPRESENTATIVES.		
	N: Accounting email: Accounting	g@ejhconstruction.com					
ACCORD 25-S (1/9	95) Fax: (248) 478-3400				ACCORD CORPORATION 1988/LT00		

ACCORD CORPORATION 1988/LT00