

NEW VENDOR REQUEST FORM

All sections must be completed; otherwise invoice payments will be delayed.

New	

Update

				VENDOR D	ETAILS					
	Invoices should be emailed to accountspayable@gwrr.com.									
	Statements, in	quiries an	d correspon	dence should	be email	led to apco	rresponde	ence@gwrr	.com.	
	Company Name									
Vendor	DBA Name						Form W-9 a	ttached		
completed by Ven	Main Address									
omple	Remittance Address									
To be c	Accounting Contact Name			Phone			Email			
T	Purchasing Contact Name			Phone			Email			
	PAYMENT DETAILS									
		******		Nyoming standard p				stitution confirm	ing your account	
	EFT	Completed EFT form along with a voided check or letter from your financial institution confirming your and routing number are required.							ning your account	
	Credit Cards Accepted		Credit card fee amounts							

_ _	As per compan				•	TO BE PROVI rd and purchases of	DED over \$2,500 should be on a PO.			
requestor	What will vendor be used for:									
G&W	Related Party			No		Description				
þγ										
completed	REQUESTOR									
	Name				Company/ Railroad					
To be	Financial Manager Name				Department					
	Financial Mgr Signature				Date					

AP	Legal Entity	4505	8770		9901		9902	
ed by	Vendor account		LOB			Group		
completed	Method of Payment			Payment Term	าร			
be co	1099 Vendor	Yes	No		1099 Box			
То	Default Dept/BU/Approver							
	Approved By				Date			



Genesee & Wyoming Inc. 200 Meridian Centre, Suite 300 Rochester, NY 14618

REQUEST FOR ELECTRONIC PAYMENTS

Genesee & Wyoming Inc. and Subsidiaries offers Electronic Funds Transfer (EFT) as a method of payment to our vendors. Payments will be electronically deposited to your designated bank account and remittance details will be sent via e-mail.

If you are interested in receiving your payments electronically, please complete the information below and return this form along with a voided check or a letter from your financial institution confirming your banking information.

Vendor Name	
G&W Vendor ID Located on the check stub to the right of	the Vendor Name.
Vendor Tax ID (EIN or SSN)	
Banking Information: Bank Name	
Routing/ABA Number	(must be 9 Digits)
Bank Account Number	
Previous Bank Account Number (if updating)	
EFT Remittance Email	
Vendor Contact Information: Name	
Phone	
E-mail	
Authorized by (Please Print)	
Signature	
Title Date	
Please return the completed documents to apcorrespondenc	
For internal use only: Verbal Confirm performed by	
Notes:	

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Befor	e yo	bu begin. For guidance related to the purpose of Form W-9, see <i>Purpose of Form</i> , below.		
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the or entity's name on line 2.)	wner's name on line	1, and enter the business/disregarded
	2	Business name/disregarded entity name, if different from above.		
Print or type. Specific Instructions on page 3.		Check the appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. Individual/sole proprietor C corporation S corporation Partnership LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) to classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check box for the tax classification of its owner. Other (see instructions) If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax and you are providing this form to a partnership, trust, or estate in which you have an ownership in this box if you have any foreign partners, owners, or beneficiaries. See instructions	Trust/estate	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) (Applies to accounts maintained outside the United States.)
See	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name a	and address (optional)
	6	City, state, and ZIP code		
	7	List account number(s) here (optional)		
Par	t I	Taxpayer Identification Number (TIN)		
			Social sec	curity number

Inter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid			Social security number					
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other			_			-		
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> . later.	or							
<i>m</i> , ido.	Em	ployer i	denti	ficati	on n	umb	er	

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II	Certification							

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. 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 am 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 exempt 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 for Part II, later.

Sign	Signature of
Here	U.S. person

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification. New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

Date

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they