



## **PITKIN COUNTY EMERGENCY ASSISTANCE FUND APPLICATION**

The Pitkin County Emergency Assistance Fund (EAF) was established in 2009 in response to the severe economic recession that was experienced throughout the nation and the world. The purpose of the program was and is to assist Pitkin County residents who are experiencing a financial crisis by providing financial assistance to help bridge the gap between the crisis and return to self-sufficiency. The EAF typically assists with funds for late rent that can be paid directly to the landlord after necessary verifications of income and other required information have been made. The program is administered by the Pitkin County Economic Assistance department and is funded by the Healthy Community Fund. The attached W-9 form is to be completed by the person that will receive payment IF the application is approved.

Please submit the completed application to the Pitkin County Economic Assistance Department in person or via mail or emailed to [pitkin-ea@pitkincounty.com](mailto:pitkin-ea@pitkincounty.com):

**0405 Castle Creek Road, Suite 103, Aspen, CO 81611**

**An interview is required for this program. Please schedule your interview when you submit your application. If you have mailed in the application, the department will contact you to schedule the interview.**







## **EMERGENCY ASSISTANCE FUND PRE-APPLICATION CHECKLIST**

Please use this checklist to prepare your application for submission. Completing each of these tasks and/or responding to the statements does not guarantee eligibility for assistance, but it will help to ensure that your application is processed and your eligibility determined as quickly as possible. Completing this checklist is not required to submit an application for assistance; it is meant to be used as a tool to ensure a complete application and to reduce the amount of time before a decision can be rendered. Thank you.

### **Pre-screening Questions**

- At least one household member is a legal resident of the United States of America.
- I am a resident of Pitkin County and have been for the past three months.
- Our household will be able to maintain self-sufficiency (pay our bills and expenses without additional assistance) if we are approved for this one-time emergency assistance.
- No one in our household has been approved for Pitkin County Emergency Assistance in the past 12 months

Has your household been approved for any emergency assistance from other organizations in the past three months and/or will you/are you applying for assistance elsewhere?  Yes  No

### **Verifications (Required and Typically Requested)**

Verifications are pieces of information that provide information that is necessary to process your application for assistance. Some of these are required for all applications and are denoted with an asterisk (\*), while others are requested on a case-by-case basis. Providing this documentation with your application will expedite processing and eligibility determination. If you do not attach this information to your application, it is recommended that you have it on hand in the case that it is requested.

<input type="checkbox"/> Photo Identification*	<input type="checkbox"/> Child Support/custody agreements
<input type="checkbox"/> Lease Agreement/Mortgage Statement*	<input type="checkbox"/> Overdue Rent Repayment agreements
<input type="checkbox"/> Bank Statements (Past 3 Months)*	<input type="checkbox"/> Account disposition letters
<input type="checkbox"/> Income/Employment verification*	<input type="checkbox"/> Proof of application for additional assistance
<input type="checkbox"/> Proof of residency/citizenship*	<input type="checkbox"/> Job offer letters
<input type="checkbox"/> Eviction Notice(s)	<input type="checkbox"/> Additional supporting documentation
<input type="checkbox"/> Utility Notices	









**ASSISTANCE TYPE**

- |                                    |                                       |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Rent      | <input type="checkbox"/> Vehicle      |
| <input type="checkbox"/> Mortgage  | <input type="checkbox"/> Medical      |
| <input type="checkbox"/> Utilities | <input type="checkbox"/> Other: _____ |

**Amount Requested** *(Please keep in mind existing policy caps the assistance amount at \$1,000.00 once every twelve months)*

\_\_\_\_\_

**Comments** *(Please feel free to include any additional comments that you believe will help explain the cause of the emergency – this portion is optional)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the above statements are true and correct to the best of my knowledge. I understand that a false statement may disqualify me for benefits. I give my permission to the Pitkin County Department of Economic Assistance to verify and share my information with other agencies as needed.

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**





# Estimated Budget



## Monthly Income

**Gross Monthly Income** \$

Salary \$ \_\_\_\_\_  
Interest \$ \_\_\_\_\_  
Dividends \$ \_\_\_\_\_  
Other Income \$ \_\_\_\_\_

### Less

1. Charity/Giving \$ \_\_\_\_\_  
2. Taxes (Federal / State / Fica) \$ \_\_\_\_\_

**Net Spendable Income** \$

## Monthly Living Expenses

**3. Housing** \$

Mortgage/Rent \$ \_\_\_\_\_  
Insurance \$ \_\_\_\_\_  
Property taxes \$ \_\_\_\_\_  
Cable TV \$ \_\_\_\_\_  
Electricity \$ \_\_\_\_\_  
Gas \$ \_\_\_\_\_  
Water \$ \_\_\_\_\_  
Sanitation \$ \_\_\_\_\_  
Telephone \$ \_\_\_\_\_  
Maintenance \$ \_\_\_\_\_  
Internet service \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

**4. Food** \$

**5. Transportation** \$

Payments \$ \_\_\_\_\_  
Gas & Oil \$ \_\_\_\_\_  
Insurance \$ \_\_\_\_\_  
License/Taxes \$ \_\_\_\_\_  
Maintenance \$ \_\_\_\_\_  
Replacement \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

**6. Insurance** \$

Insurance \$ \_\_\_\_\_  
Life \$ \_\_\_\_\_  
Health/Dental \$ \_\_\_\_\_  
Disability \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

**7. Debts** (not including house or auto) \$

**8. Entertainment/ Recreation** \$

Eating out \$ \_\_\_\_\_  
Babysitters \$ \_\_\_\_\_  
Activities/Trips \$ \_\_\_\_\_  
Vacation \$ \_\_\_\_\_  
Pets \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

**9. Clothing** \$

**10. Savings** \$

**11. Medical / Dental** \$

Doctor \$ \_\_\_\_\_  
Dentist \$ \_\_\_\_\_  
Prescriptions \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

**12. Miscellaneous** \$

Toiletries/Cosmetics \$ \_\_\_\_\_  
Beauty/Barber \$ \_\_\_\_\_  
Laundry/Cleaners \$ \_\_\_\_\_  
Allowances \$ \_\_\_\_\_  
Subscriptions \$ \_\_\_\_\_  
Gifts \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_

**13. Investments** \$

**14. School / Childcare** \$

Tuition \$ \_\_\_\_\_  
Materials \$ \_\_\_\_\_  
Transportation \$ \_\_\_\_\_  
Childcare \$ \_\_\_\_\_

**Total Living Expenses** \$

## How the Month Turns Out

**NET SPENDABLE INCOME** \$

**- TOTAL LIVING EXPENSES** \$

\$





Verification of Lawful Presence  
AFFIDAVIT

Pitkin County Department of Human Services – Economic Assistance Department

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen, or  
 I am a Permanent Resident of the United States, or  
 I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

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

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



# Colorado Voter Registration Form

Fill out all fields marked with an asterisk (\*)

**1 Eligibility** \* Are you a citizen of the United States?  Yes  No **If you answered "No", do not complete this form.**

**2 Name** \_\_\_\_\_  
 \* Last Name \* First Name Middle Name Suffix

**3 Identification**  
 Provide your birth date and your identification information.

Remember to write your birth date below.  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 \*MM \*DD \*YYYY

I have a valid CO Driver's License or ID card.  
**Write that number here:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

I do not have a CO Driver's License or ID card.  
**Write the last four digits of your SSN here:** X X X - X X - \_\_\_\_\_

I do not have a Colorado Driver's License, ID card, or a Social Security Number.

**4 The address where you live**

\* Address (no P.O. Boxes) \_\_\_\_\_ Unit Number \_\_\_\_\_ \* City or Town \_\_\_\_\_  
 CO  
 State \* Zip Code \_\_\_\_\_ Colorado County \_\_\_\_\_  
 I am homeless. This is a location I regularly return to. I have also provided a mailing address in Section 5.

**5 The address where you receive mail**

Same as above \_\_\_\_\_  
 Address \_\_\_\_\_  
 City or Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**6 The address to mail your ballot**  
 The County will mail your ballot here until you say otherwise.

Same as above \_\_\_\_\_  
 Address \_\_\_\_\_  
 City or Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**7a Political affiliation**  
 Choose only 7a or 7b


I would like to be a member of the following political party:  
 American Constitution  Approval Voting  Democratic  Green  Libertarian  Republican  Unity

**7b**  I would like to be Unaffiliated, but I want to receive the following party's ballot in the next primary election:  
 All Major Parties' Ballots  American Constitution  Approval Voting  Democratic  Green  
 Libertarian  Republican  Unity

**8 Updating a current record?**  
 If so, you must provide the applicable changes here.

I am not updating a current record  I am no longer overseas  I am no longer absent from Colorado due to military service

Previous home address \_\_\_\_\_ Previous legal name \_\_\_\_\_  
 Previous mailing address \_\_\_\_\_ Previous party affiliation \_\_\_\_\_

**9 Declaration** 

**Warning:** It is a Class 1 misdemeanor to swear or affirm falsely as to your qualifications to register to vote.  
**Self-Affirmation:** I affirm that I am a citizen of the United States; I have been a resident of Colorado for at least twenty-two days immediately before an election I intend to vote in; I am at least sixteen years old; and I understand that I must be at least seventeen and turning eighteen on or before the date of the next general election to be eligible to vote in a primary election, and at least eighteen to be eligible to vote in any other election. I further affirm that the residence address I provided is **my sole legal place of residence**. I certify under penalty of perjury that the information I have provided on this application is true to the best of my knowledge and belief; and that I have not, nor will I, cast more than one ballot in any election.

\_\_\_\_\_  
 \* Signature or mark \* Date Witness Signature \_\_\_\_\_ Date \_\_\_\_\_  
 If you are unable to sign, you must make a mark and have the mark witnessed by another person.

**10 Optional information**

Phone number with area code \_\_\_\_\_ Gender Identity \_\_\_\_\_  I would like to be an election judge

I want to receive election information by email:  
 (You will not receive a ballot by email) \_\_\_\_\_  
 Email address \_\_\_\_\_

## Information about this registration

### How do I turn in this form?

Sign the form. Then mail, deliver, or scan the signed form and email it to your county clerk and recorder. You may find a list with contact information at [www.govotecolorado.gov](http://www.govotecolorado.gov).

You may also mail it to:

Colorado Department of State  
Elections Division  
1700 Broadway, Suite 550  
Denver, CO 80290

### Am I eligible to register to vote?

You are eligible to register to vote if you:

- Are a United States citizen
- Are 16 years old, but you must be at least 18 to vote in an election
- Are a Colorado resident for at least 22 days immediately before the election you intend to vote in
- Are not currently serving a term of imprisonment for a felony conviction

### If I don't know my Colorado driver's license or Colorado ID card number may I provide my Social Security Number instead?

No. If you have a Colorado Driver's License or ID card issued by the Colorado Department of Revenue, you must provide that number.

### If I don't have a Colorado driver's license, Colorado ID card, or social security number, may I still register to vote?

Yes. An applicant who is qualified to vote in this state but does not have a driver's license, state-issued identification card, or social security number may still register to vote. In such cases, the person may be required to provide an acceptable form of identification. A list of acceptable forms of identification can be found at [www.govotecolorado.gov](http://www.govotecolorado.gov).

### How will I know if my registration was processed?

If you are registering to vote for the first time in the state of Colorado, your application will be processed within 2 weeks. Approximately 20 days after your county clerk and recorder receives your registration form, you will receive an official information card by mail.

If you are using this form to update an existing Colorado voter registration, you can check your status by visiting [www.govotecolorado.gov](http://www.govotecolorado.gov) and clicking on "Find My Registration".

If you are pre-registering to vote, you will receive an official information card by mail and may check your status once you become eligible to vote.

## Information for unaffiliated voters

*I am registered as unaffiliated. Will I be able to vote in the primary election?*

Yes. Unaffiliated voters are eligible to vote in the primary election, but you may only vote one party's ballot.

*Do I have to choose in advance which party's ballot I want to vote?*

No, but you can if you want to. You have several options:

1. You may choose which party's ballot you want to get in the mail for the next primary election by checking the box next to that party in Section 7b of this form; or
2. If you would rather receive a packet containing the Democratic and Republican party ballots, check "All Major Parties' Ballots" in Section 7b of this form. If you check "All Major Parties' Ballots" in section 7b of this form, remember that you must choose which ballot to vote. Only vote and return one party's ballot.
3. You can also appear in person at any Voter Service and Polling Center in your county and choose the party's ballot you want to vote.

*Does selecting a preference in Section 7b mean that I am joining that party?*

No. An unaffiliated voter who selects a ballot preference will remain unaffiliated.

*Can I participate in a party's caucus meeting if I am unaffiliated?*

No. To participate in a party caucus meeting you must join that party before the party's caucus. However, you are still eligible to vote in any participating party's primary election.

## Other frequently asked questions about registering and voting

### Will I need identification to vote?

If you vote in person, yes. If you are voting by mail for the first time, you may need to provide a photocopy of your ID.

A complete list of acceptable forms of identification can be found at [www.govotecolorado.gov](http://www.govotecolorado.gov).

### How do I get a mail ballot?

If you register to vote at least eight days before an election conducted by your county clerk and recorder, the clerk will automatically mail you a ballot. If you register after the eighth day before Election Day, you must visit one of the Voter Service and Polling Centers in your county to get a ballot.

### May I register to vote if I was arrested for or convicted of a crime?

Yes, if you

- Are on probation for either a misdemeanor or felony;
- Are a pretrial detainee awaiting trial;
- Are currently in jail serving a misdemeanor sentence only; OR
- Are no longer serving a term of imprisonment due to a felony conviction.

If you were previously registered and were incarcerated due to a felony conviction, that registration will have been canceled and you must re-register if you wish to vote.

### What information will I receive by email?

By choosing to receive election information by email, you may receive information about upcoming election activities and other election correspondence by email from your county clerk and recorder. But ballots and some mailings will still be sent by regular mail. Under Colorado law, your email address is protected. It will not be shared with anyone.

### Will my information be publicly available?

Some of the information you provide on this form is public information as required by law. Your social security number, driver's license number, month and day of birth, signature, and email are confidential. You may be eligible to keep more of your voter information private. For details contact your county clerk and recorder.

### Who should I contact if I have more questions?

Contact your county clerk and recorder. You can find a list with contact information at [www.govotecolorado.gov](http://www.govotecolorado.gov).

You may also contact the Secretary of State's office

Phone: 303-894-2200

Fax: 303-869-4861

Email: [State.ElectionDivision@coloradosos.gov](mailto:State.ElectionDivision@coloradosos.gov)

# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <hr/> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC      <input type="checkbox"/> C Corporation      <input type="checkbox"/> S Corporation      <input type="checkbox"/> Partnership      <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p><b>6</b> City, state, and ZIP code</p> <hr/> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p> <hr/>

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid 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 *How to get a TIN*, later.

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

<b>Social security number</b>											
				-			-				
<b>or</b>											
<b>Employer identification number</b>											
				-							

## 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## 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](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct 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, later.*

# Solicitud y Certificación del Número de Identificación del Contribuyente

► Visite [www.irs.gov/FormW9SP](http://www.irs.gov/FormW9SP) para obtener las instrucciones y la información más reciente.

Entregue el formulario al solicitante. No lo envíe al IRS.

Escriba en letra de molde o a máquina. Vea Instrucciones Específicas en la página 3.

<b>1</b> Nombre (tal como aparece en su declaración de impuestos sobre el ingreso). Se le requiere anotar un nombre en esta línea; no deje esta línea en blanco.	
<b>2</b> Nombre del negocio/Nombre de la entidad no considerada como separada de su dueño, si es diferente al de arriba.	
<b>3</b> Marque el encasillado correspondiente para la clasificación tributaria federal de la persona cuyo nombre se indica en la línea 1. Marque solo <b>uno</b> de los siguientes 7 encasillados:  <input type="checkbox"/> Individuo/empresario por cuenta propia o LLC de un solo miembro <input type="checkbox"/> Sociedad anónima tipo C <input type="checkbox"/> Sociedad anónima tipo S <input type="checkbox"/> Sociedad colectiva <input type="checkbox"/> Fideicomiso/caudal hereditario <input type="checkbox"/> Cía. de responsabilidad limitada (LLC). Anote la clasificación tributaria (C=Soc. anónima tipo C, S=Soc. anónima tipo S, P=Soc. colectiva) ► _____  <b>Nota:</b> Marque el encasillado correspondiente en la línea anterior de la clasificación tributaria de la LLC de un solo miembro. No marque LLC si la LLC está clasificada como una de un solo miembro que no es considerada separada de su dueño, a menos que el dueño sea otra LLC que <b>no</b> es considerada separada de su dueño para propósitos tributarios federales estadounidenses. De lo contrario, vea las instrucciones en la página 3.  <input type="checkbox"/> Otro (vea las instrucciones) ► _____	<b>4</b> Exenciones (los códigos aplican solo a ciertas entidades, no a individuos; vea las instrucciones en la página 4):  Código de beneficiario exento (si alguno) _____  Código para la exención de la declaración conforme a FATCA (si alguno) _____ <i>(aplica a las cuentas mantenidas fuera de los EE.UU.)</i>
<b>5</b> Dirección (número, calle y número de apartamento o de suite). Vea las instrucciones.	Nombre y dirección del solicitante (opcional)
<b>6</b> Ciudad, estado y código postal (ZIP)	
<b>7</b> Anote el (los) número(s) de cuenta(s) aquí (opcional)	

## Parte I Número de identificación del contribuyente (TIN)

Anote su número de identificación del contribuyente (TIN, por sus siglas en inglés) en el encasillado correspondiente. El TIN tiene que concordar con el nombre provisto en la línea 1 para evitar la retención adicional del impuesto. Para los individuos, este es, por lo general, su número de Seguro Social (SSN, por sus siglas en inglés). Sin embargo, para un extranjero residente, empresario por cuenta propia o entidad no considerada como separada de su dueño, vea las instrucciones para la Parte I, más adelante. Para otras entidades, es su número de identificación del empleador (EIN, por sus siglas en inglés). Si no tiene un número, vea **Cómo obtener un TIN**, más adelante.  
**Nota:** Si la cuenta está a nombre de más de una persona, vea las instrucciones para la línea 1. Vea también **Nombre y número que se le debe dar al solicitante** para recibir asesoramiento sobre cuál número debe anotar.

<b>Número de Seguro Social</b>									
o									
<b>Número de identificación del empleador</b>									

## Parte II Certificación

Bajo pena de perjurio, yo declaro que:

1. El número que aparece en este formulario es mi número de identificación de contribuyente correcto (o estoy esperando que me asignen un número) y
2. No estoy sujeto a la retención adicional de impuestos porque: (a) estoy exento de la retención adicional o (b) no he sido notificado por el Servicio de Impuestos Internos (IRS, por sus siglas en inglés) de que estoy sujeto a la retención adicional de impuestos como resultado de no declarar todos los intereses o dividendos o (c) el IRS me ha notificado que ya no estoy sujeto a la retención adicional y
3. Soy ciudadano de los EE.UU. u otra persona de los EE.UU. (definido después) y
4. El (Los) código(s) de la *Foreign Account Tax Compliance Act* (Ley de Cumplimiento Tributario para Cuentas Extranjeras o FATCA, por sus siglas en inglés) anotado(s) en este formulario (si alguno) indicando que estoy exento de declarar conforme a FATCA es el (son los) correcto(s).

**Instrucciones para la certificación.** Tiene que tachar la partida 2 anterior si el IRS le ha notificado que usted en estos momentos está sujeto a la retención adicional de impuestos porque no declaró todos los intereses y dividendos en su declaración de impuestos. Para las transacciones de bienes inmuebles, la partida 2 no corresponde. Para los intereses hipotecarios pagados, la adquisición o abandono de bienes asegurados, la cancelación de deudas, las contribuciones a un arreglo de jubilación individual (IRA, por sus siglas en inglés) y, por lo general, los pagos que no sean intereses y dividendos, no se le requiere firmar la certificación pero tiene que proveer su TIN correcto. Vea las instrucciones para la Parte II, más adelante.

**Firme Aquí**

Firma de la persona de los EE.UU. ►

Fecha ►

## Instrucciones Generales

Las secciones a las cuales se hace referencia son del Código Federal de Impuestos Internos, a menos que se indique de otra manera.

**Acontecimientos futuros.** Si desea obtener información sobre los más recientes acontecimientos que afectan al Formulario W-9(SP) y sus instrucciones, tales como legislación promulgada después de que estos se han publicado, visite [www.irs.gov/FormW9SP](http://www.irs.gov/FormW9SP).

## Propósito del formulario

Una persona o entidad (nombrada en el Formulario W-9(SP)) a quien se le requiera presentar una declaración informativa ante el IRS tiene que obtener su TIN correcto, el cual puede ser su SSN, número de identificación del contribuyente (ITIN, por sus siglas en inglés), número de identificación del contribuyente para adopción (ATIN, por sus siglas en inglés) o EIN, para declarar en una declaración informativa la cantidad pagada a usted u otra cantidad declarada en una declaración informativa. Ejemplos de declaraciones informativas incluyen, pero no se limitan a, los siguientes: