State Agriculture Development Committee

Farmland Stewardship Wildlife Fencing Program

Application for Cost-Share Grant Funding for the Installation of Wildlife Fencing on Permanently Preserved Farmland

Effective 4-20-26

Overview – Farmland Stewardship Wildlife Fencing Program

Introduction

The Farmland Stewardship Wildlife Fencing Program makes cost-share funding available for the installation of wildlife fencing (high-tensile woven wire deer fencing, electric bear fencing, or other wildlife fencing) on permanently preserved farms. The program is conducted in accordance with State Agriculture Development Committee (SADC) Policy P-53, https://www.nj.gov/agriculture/sadc/documents/rules/p53.pdf.

Availability of Cost-Share Grant

Cost-share funding for the installation of wildlife fencing on permanently preserved farms is subject to the following conditions:

a. Grant amounts available to eligible applicants shall be in the form of an up to 50 percent matching grant, with the remaining percent of project costs provided by the applicant.

b. Grant amounts available to eligible applicants will not exceed $50,000. The eligibility grant amounts for a subdivision(s) of a Premises will be calculated pro rata on a per acre basis among the subdivided parcels. Grants will be paid on a reimbursement basis.

c. Each individual permanently preserved farm (each Premises) shall not be eligible for more than $50,000 in Farmland Stewardship Wildlife Fencing Program cost-share grants per eight-year period, with the period beginning on the date of completion of the first approved wildlife fencing implementation project. Once a farm has received its maximum eligibility amount, it shall not be eligible to apply for additional wildlife fencing cost-share grants until the next eight-year period.

Eligibility for Cost-Share Grant

Applicants must meet the following criteria in order to be eligible for a cost-share grant to install wildlife fencing:

a. The applicant must be an owner, operator, or lessee of permanently preserved farmland who regularly engages in the operation and management of the farming operation on the preserved farmland. If the applicant is an operator or lessee, they must have written approval to install wildlife fencing from the owner of the land.

b. The land on which the wildlife fencing is to be constructed must be permanently preserved farmland enrolled in a Farmland Preservation Program approved by SADC.

c. If deer fencing is to be installed, the applicant must certify they have watched the SADC's deer fence installation training video or participated in an SADC-approved deer fence installation training session.

d. The applicant must install wildlife fencing in accordance with the specifications prescribed in Policy P-53.

e. The applicant must have, or obtain prior to reimbursement, an approved farm conservation plan that addresses soil and water resources for the area to be fenced.

f. The applicant must submit a completed W-9 form to the NJ Department of Treasury (and cc the SADC) to get in the fiscal processing system. A blank W-9 is included at the end of this application. The form should be emailed or mailed to the NJ Department of Treasury: aaiunit@treas.nj.gov or mail: OMB-Vendor Control Unit/PO Box 221/Trenton, NJ 08625-0221.

Applying for Cost-Share Grant

Applicants must use this application to apply for a Farmland Stewardship cost-share grant for the installation of wildlife fencing on their preserved farm. Each application will be reviewed to ensure the site-specific feasibility of installing wildlife fencing on the farm. For the SADC to determine that an application is feasible, there must be a demonstrated need for the wildlife fencing, and the proposed fencing must be in compliance with the deed of easement and all other applicable laws, rules, and regulations.

Only applications that are complete, with the necessary information and attachments, will be reviewed for approval. If an application is incomplete, it is the applicant's responsibility to provide any missing information or attachments to make it complete.

Completed applications will be reviewed and approved on a rolling basis in the order in which they are received. In the event multiple applications are received on the same day, and funding is insufficient to fund the applications' implementation projects, the projects will be ranked for purposes of prioritizing them for available funding. Projects will be ranked by means of a numeric rating scale, and funding will be expended by rank order (highest to lowest) until available funding has been exhausted pursuant to Policy P-53.

Completing the Approved Fencing Project

Applicants must commence their approved fencing project within six months of approval by the SADC and must complete the project within three years of said approval. "Commence" means purchasing a majority (greater than fifty percent) of the materials necessary to install a feasibility plan's wildlife fencing project and providing the SADC with satisfactory written proof of purchase. If the wildlife fencing is to be installed by a contractor, "commence" means providing the SADC with copies of the signed contract and any required contract deposit. Approved wildlife fencing projects must completely enclose an area and be maintained for a lifespan of at least 10 years.

Reimbursement

The SADC will issue a grant reimbursement payment only upon completion of the approved project. Project completion means installing the approved fencing project, scheduling an inspection by SADC staff, correcting any deficiencies noted during the inspection, and submitting bills for reimbursement to the SADC using a reimbursement form authorized by the SADC.

For More Information

Please read Policy P-53, including the required specifications for high-tensile woven wire deer fencing (Exhibit A) and electric bear fencing (Exhibit B), and contact the SADC at (609) 984-2504 if you have any questions about the program or application process. More information also is available on the SADC website at www.nj.gov/agriculture/sadc/farmpreserve/postpres/.

Application for Cost-Share Grant to Install Wildlife Fencing on Permanently Preserved Farmland

Farm Information – Please complete the following information about the preserved farm on which you would be installing wildlife fencing.

Landowner Details

Name: _____

Mailing Address _____

Farm Address (If different): _____

Daytime Phone _____ Is this landowner's preferred phone? Yes ☐ No ☐

Cell Phone _____ Is this landowner's preferred phone? Yes ☐ No ☐

Email: _____

Farm Details

Total Farm Acreage: _____

County: _____

Municipality: _____ Block/Lot: _____ Acres: _____

Municipality: _____ Block/Lot: _____ Acres: _____

Municipality: _____ Block/Lot: _____ Acres: _____

Municipality: _____ Block/Lot: _____ Acres: _____

Municipality: _____ Block/Lot: _____ Acres: _____

Has the farm been subdivided since it was preserved?

Yes ☐ No ☐

Has the farm previously received an SADC wildlife (deer, bear, or other) fencing grant?

Yes ☐ No ☐

How was the farm preserved?

☐ Through an SADC Farmland Preservation Program

☐ Through one of the following ways:

- Through its Pinelands Development Credits being severed and deed restrictions recorded pursuant to N.J.S.A. 13:18A-30, et seq. and N.J.A.C. 7:50-5.41 et seq.
- Through its Highlands development credits being severed and deed restrictions recorded through a transfer of development rights program pursuant to N.J.S.A. 13:20-13 and N.J.A.C. 7:70-4.1 et seq.
- Through an agricultural deed restriction being recorded as part of a municipal cluster development pursuant to N.J.S.A. 40:55D-39.1.

Note: If the farm was not preserved through an SADC Farmland Preservation Program, please attach a copy of the agricultural deed restrictions for the land on which the wildlife fencing would be installed.

Applicant Information – Please complete the following information about the person or entity who is applying for a wildlife fencing grant.

Who is the applicant?

☐ Landowner – Same as above.

☐ Operator (of the land to be fenced) – Please fill in the Applicant Details below.

☐ Lessee (of the land to be fenced) – Please fill in the Applicant Details below.

Applicant Details – Please fill in if the Applicant is not the Landowner.

Name: _____

Mailing Address _____

Daytime Phone _____ Is this applicant's preferred phone? Yes ☐ No ☐

Cell Phone _____ Is this applicant's preferred phone? Yes ☐ No ☐

Email: _____

Are you regularly engaged in the operation and management of the farming operation on the preserved farm?

Yes ☐ No ☐

Tax Identification Number/W-9 Form (required)

Note: The applicant must submit a completed W-9 Form to the NJ Department of Treasury and should cc the SADC. This is what enables the NJ Department of Treasury to process grant payments to the applicant. Please see the end of this application for a blank W-9 Form and instructions.

If the Applicant is a Business Entity:

Name of person completing this application and applying on behalf of business entity:

_____

Title of person completing this application and applying on behalf of business entity:

_____

If the Applicant is not the Owner of the land to be fenced:

Note: If you are not the Owner of the land, you must provide written approval to install fencing from the Owner of the land on which the fencing is to be installed.

A "Landowner Approval Form" that you may use for this purpose is attached at the end of this application.

Area to Be Fenced – Please answer the following regarding the area where you are planning to install wildlife fencing.

1. Number of acres to be fenced: _____
2. Approximate linear feet of fencing that would be installed: _____
3. Type of wildlife fencing to be installed:

   ☐ High-tensile woven-wire deer fencing
   ☐ Electric bear fencing
   ☐ Other (please describe type of fencing, including wildlife to be excluded)

4. How much of the area to be fenced is:

   Cropland: _____ acres

   Pastureland: _____ acres

   Woodland: _____ acres

Other: _____ acres

5. Please attach a map that clearly shows the following **(required)**:

   - Recent aerial photography of the property (as the background)
   - The approximate boundaries of the farm (farm outline)
   - The proposed location of the fencing (fence outline)
   - The proposed location of the fencing's corners, gates, and line brace assemblies
   - The location of any existing deer, bear, or other wildlife fencing
   - All known rights of way within 50 feet of the proposed fence

   Mapping Notes and Resources: The fenced area must be completely enclosed by wildlife fencing that meets the specifications in Policy P-53, which is available at https://www.nj.gov/agriculture/sadc/documents/rules/p53.pdf. The following are some resources – with aerial photography and other information – that you could use to help create your map (see p. 13 for an example map):

   - **SADC New Jersey Preserved Farmland Map** – Online map of preserved farmland: https://www.nj.gov/agriculture/sadc/ (click "SADC Interactive Web Map" at bottom left)
   - **Google Maps** – Online tool provided by Google: https://www.google.com/maps
   - **NJ-GEOWEB** – Online tool provided by NJDEP: http://www.nj.gov/dep/gis/geowebsplash.htm
   - **Web Soil Survey** – Online tool provided by USDA NRCS: http://websoilsurvey.sc.egov.usda.gov/
   - **Farm conservation plan** – Includes a map created by NRCS for your farm conservation plan: https://www.nrcs.usda.gov/wps/portal/nrcs/main/nj/contact/local/
   - **Rutgers Cooperative Extension** – If you need assistance with mapping, your Rutgers Cooperative Extension county agent may be able to help: https://njaes.rutgers.edu/county/

6. Are there any known rights of way within 50 feet of the proposed fence?

   Yes ☐ No ☐

7. What crops are you **currently growing** in the area to be fenced? Provide the crop(s) and number of acres of each crop.

   Crop: _____ Acres: _____

   Crop: _____ Acres: _____

   Crop: _____ Acres: _____

Crop: _____ Acres: _____

8. What crops are you **planning to grow** in the area to be fenced? Provide the crop(s) and number of acres of each crop.

   Crop: _____ Acres: _____

   Crop: _____ Acres: _____

   Crop: _____ Acres: _____

   Crop: _____ Acres: _____

9. (If available) What was the gross dollar loss from wildlife damage for the previous calendar year in the area proposed to be fenced? Please provide documents showing the extent of the crop damage (such as crop insurance claims or other verifiable documentation or information).

   _____

   _____

10. How much do expect the fencing project to cost (the total amount before the grant)?

    _____

11. Please attach a written cost quote for the project **(required),** including the cost of materials and labor whether the fencing will be installed by the applicant or someone other than the applicant.

    Note: The grant amount available to an eligible applicant may be up to 50% of the actual costs (up to a maximum of $50,000), as documented by receipts and invoices on a reimbursement basis. See Policy P-53 for more information.

12. Is the farm in a no-firearm-discharge zone?

    Yes ☐ No ☐

13. Have you applied for NJDEP deer depredation permits or black bear season permits within the last three years?

    ☐ Yes – deer permit
    ☐ Yes – bear permit
    ☐ No

    If yes, please attach copies of your approved permits or denial letters.

14. Is the farm actively hunted?

    Yes ☐ No ☐

15. Are there parcels of public open space (owned by state, county, or municipal government or by non-profits) within 200 feet in all directions of the premises where hunting is prohibited?

    Yes ☐ No ☐

    If yes, identify the name and location of the parcels: _____

    _____

16. Have you used any other hunting or wildlife abatement measures for the land to be fenced?

    If yes, please describe: _____

    _____

Additional Information

1. Do you have a farm conservation plan (or have you requested a farm conservation plan) that addresses soil and water resources for the area to be fenced? **(required)**

   Yes ☐ No ☐

   If yes, please attach a copy of the plan (or documentation showing that you have requested a plan).

   Note: For your application to be complete, and in order for it to be approved, you must submit an approved farm conservation plan (or documentation showing that you have requested a plan) that addresses soil and water resources for the area to be fenced. Please contact the SADC if you need help obtaining a plan: www.nj.gov/agriculture/sadc/about/contact/.

   Additional Note: Later, once the project has been completed and you are seeking grant reimbursement, you must at that time have obtained, prior to reimbursement, an approved farm conservation plan that addresses soil and water resources for the area that was fenced.

2. Are you proposing to fence at least five acres of woodland for woodland management purposes?

   Yes ☐ No ☐

If yes, please attach a copy of a signed Woodland Management Plan or Forest Stewardship Plan (or documentation showing that you have requested a plan) that includes wildlife fencing as a recommended management practice.

Note: Projects that propose to fence at least five acres of woodland must have a signed Woodland Management Plan or Forest Stewardship Plan, with wildlife fencing as a recommended management practice, from a forester approved pursuant to N.J.A.C. 7:3-2. Please contact an approved forester if you need to obtain a plan: https://www.nj.gov/dep/parksandforests/forest/privatelands/consultingforesters.html.

3. Are you a "military veteran farmer"?

   Yes ☐ No ☐

   If yes, please attach a copy of your discharge papers.

   Note: "Military veteran farmer" is defined by Policy P-53 as an eligible applicant who served in the active military, naval, or air service anywhere in the world at any time since September 11, 2001, and discharged or released therefrom under conditions other than dishonorable at the time of application.

4. **Optional:** You may also submit a letter of support from a Rutgers Cooperative Extension agent.

Application Checklist – Documents Attached with Your Application

Please indicate which of the following documents you have attached with your application (by checking the box next to each item you have attached).

Required items:

☐ Map of the proposed fence project that clearly shows the following:
- Recent aerial photography of the property (as the background)
- The approximate boundaries of the farm (farm outline)
- The proposed location of the fencing (fence outline)
- The proposed location of the fencing's corners, gates, and line brace assemblies
- The location of any existing deer, bear, or other wildlife fencing
- All known rights of way within 50 feet of the proposed fence

☐ Written cost quote for the fence project, including the cost of materials and labor.

☐ Farm conservation plan that addresses soil and water resources for the area to be fenced; (or) Documentation showing that applicant has requested a plan.

☐ W-9 form completed by the applicant.

(If the condition noted below applies) – Additional Required Items:

☐ (If the applicant is not the owner) – Landowner Approval Form, i.e., written approval from the owner of the property. Note: the end of this application has a form you can use.

☐ (If the applicant is proposing to fence at least five acres of woodland for woodland management purposes) – A Woodland Management Plan or Forest Stewardship Plan (signed copy of plan that includes wildlife fencing as a recommended management practice), (or) Documentation showing that applicant has requested a plan.

☐ (If the farm was not preserved through an SADC Farmland Preservation Program) – Agricultural deed restriction for the land on which the wildlife fence will be installed.

(If available or applicable) – Other Items:

☐ Documentation showing the extent of crop damage (crop insurance claims or other)

☐ NJDEP depredation permits (or denial letters) within the last three years

☐ Discharge papers (showing status as a military veteran farmer)

☐ Letter of support from a Rutgers Cooperative Extension agent

Required Action: Have you also done the following? Check the box if yes.

☐ W-9 form – emailed or mailed the form to the NJ Department of Treasury.

Certification

I hereby request a Farmland Stewardship Wildlife Fencing Program cost-share grant for a project to install wildlife fencing on the preserved farm as noted in this application. I agree to abide by the conditions and parameters in SADC Policy P-53. I have included in this application the number of linear feet of fencing I plan to install and number of acres I plan to fence.

I certify that:

A) I own the farmland noted in this application, or I am authorized to sign and submit this application on behalf of the landowner; OR
B) I am the operator or lessee of the farmland noted in this application, and I am submitting a "Landowner Approval Form" with this application; or

Enter "A" or "B" here: _____

I certify that if the applicant is a business entity, I am authorized to sign and submit this application on behalf of the business entity. I certify that the statements presented in this application are accurate and true to the best of my knowledge.

I understand that only applications that are complete, with the necessary information and attachments, will be reviewed for approval. If my application is deemed incomplete, I understand it is my responsibility to provide any missing information or attachments to make it complete.

If my application is for deer fencing and the application is approved, I agree to watch the SADC's deer fence installation training video or complete an SADC-approved deer fencing installation training prior to installing the fence. I agree to commence the installation project within 6 months of the approval date, and I understand I must complete the project within 3 years of approval. Project completion means installing the fence, scheduling an inspection by SADC staff, correcting any deficiencies noted during the inspection, and submitting bills for reimbursement to the SADC using a form authorized by the SADC.

I understand I will not be reimbursed if fencing is not installed to the standards and specifications contained within SADC Policy P-53 and its exhibits. If I wish to deviate from these standards and specifications, I understand I must seek and get approval from the SADC in writing, in advance, before conducting the fencing installation work. I also understand I will not be reimbursed for any work started prior to grant funding approval by the SADC, nor will I be paid for any work if the entire project is not completed within the allotted timeframe. I understand no partial payments will be made.

I understand that the fencing project must be undertaken, implemented, and maintained in compliance with the preserved farm's deed of easement, must conform with all other applicable laws, rules, and regulations, and must be maintained for a lifespan of at least 10 years. I understand the cost-share of installed fencing not retained for the requisite 10-year lifespan will be recaptured by the SADC on a pro-rated basis, rounded to the closest month, determined through annual monitoring visits to the Premises. I also understand I must have an approved conservation plan that addresses soil and water resources for the area to be fenced.

_____	_____	_____
Signature	Print Name	Date

Please submit completed applications by mail or email:

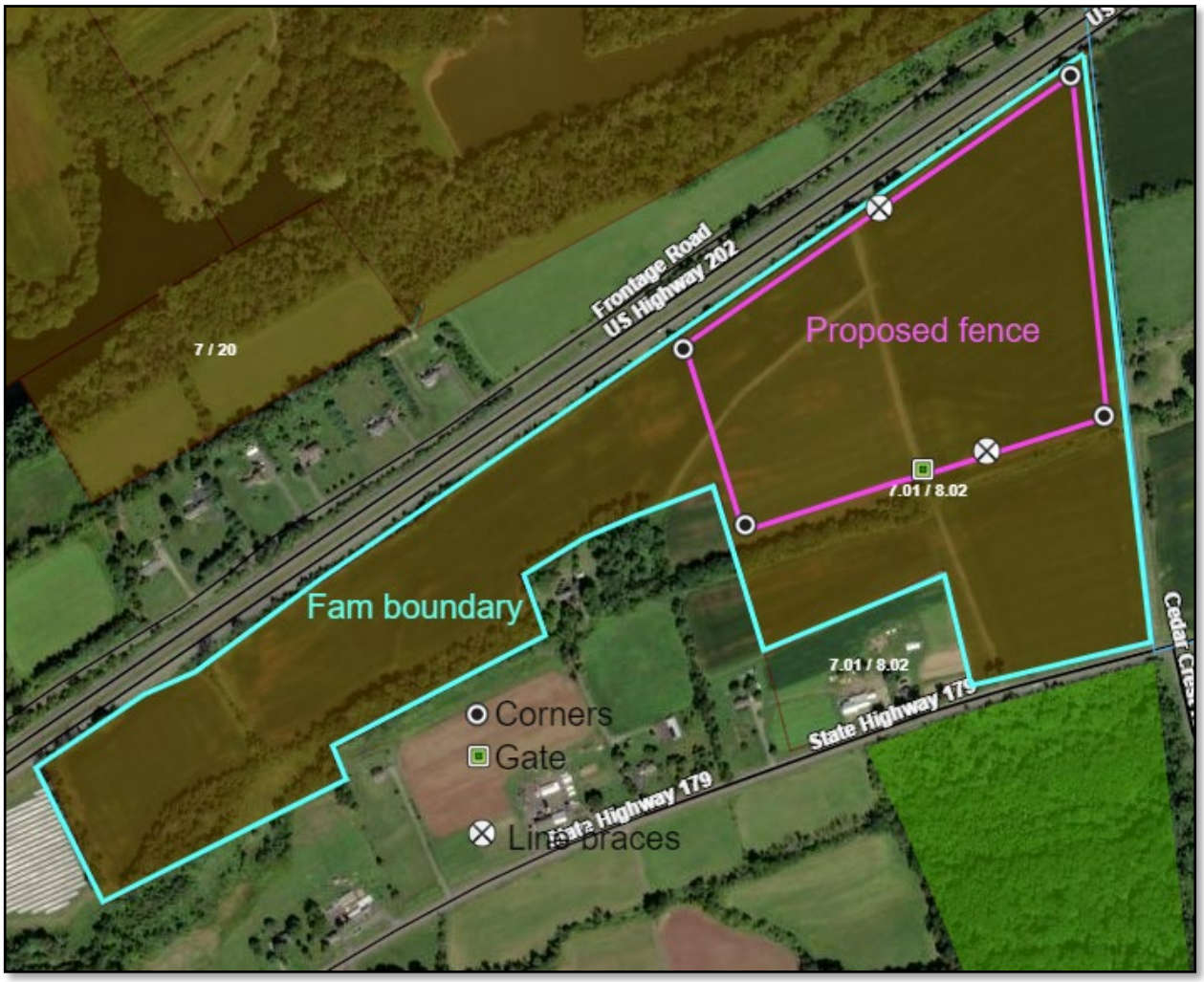
State Agriculture Development Committee
PO Box 330
Trenton, NJ 08625-0330

sadc@ag.state.nj.us

Phone: (609) 984-2504

Map Example

Map drawn with **New Jersey Preserved Farmland Map** (online tool provided by the SADC):) https://www.nj.gov/agriculture/sadc/ (click "SADC Interactive Web Map" at bottom left).



https://sonj.sharepoint.com/sites/AG/SADC/Grants/Farmland Stewardship Grants/DeerFencingGrants/ApplicationForm/WFapplication_Effective20240506.docx

State Agriculture Development Committee
Farmland Stewardship Wildlife Fencing Program

LANDOWNER APPROVAL FORM

INSTRUCTIONS: If the Applicant for a Wildlife Fencing Cost-Share Grant from the State Agriculture Development Committee (SADC) is not the Owner of the land to be fenced, the Applicant must provide to the SADC written approval from the Owner of the land on which the fencing is to be installed. Such written approval to install fencing must accompany the application. The Applicant may use this form for that purpose. If this form is being used, it should be provided to the Owner for signature and submitted with the completed application.

I understand that _____ (name of Applicant for Wildlife Fencing Cost-Share Grant) is submitting an application to receive SADC Wildlife Fencing Cost-Share Grant funds to assist with the installation of wildlife fencing on a farm located at _____ (address of farm) and known as _____(blocks/lots of farm).

I own the land described above. As Owner of the land to be fenced, I hereby give my written approval for _____ (name of Applicant) to install wildlife fencing on the above-described land.

If the Owner is a business entity (e.g., a corporation, partnership, limited liability company), I affirm that I am authorized to sign this Approval Form on behalf of that entity.

If the Owner is an Individual	**If the Owner is a Business Entity**
_____ Name of Owner (print) _____ Signature _____ Date	_____ Name of Business Entity (print) _____ Name of person signing (print) _____ Title of person signing (print) _____ Signature _____ Date

State Agriculture Development Committee
Farmland Stewardship Wildlife Fencing Program

State of New Jersey – W-9 Form

Instructions

Please see the next two pages for a blank copy of the State of New Jersey W-9 form and instructions.

The applicant must submit a completed State of NJ W-9 Form to the NJ Department of Treasury. Submitting this form is what gets the applicant in the fiscal processing system and enables the NJ Department of Treasury to process a grant payment to the applicant.

Where to send the form

As noted on the form, the applicant should email or mail their form to the following:

Email: aaiunit@treas.nj.gov

Mail: OMB-Vendor Control Unit
PO Box 221
Trenton, NJ 08625-0221

Where to additionally send the form

Additionally, the applicant should attach a copy of their W-9 form with this wildlife fencing grant application that they send to the SADC.

How to complete Part II of the State of NJ W-9 Form

The applicant should enter "OT" as the code, and they should write "Grant Recipient" on the line.

Note

If the applicant is already in the NJ Department of Treasury system, either from having previously submitted a W-9 or having registered with NJSTART, the applicant does not need to submit a W-9 form again.

INSTRUCTIONS FOR STATE OF NEW JERSEY W-9/QUESTIONNAIRE FOR NON-PROCUREMENT VENDORS

The enclosed form is required by the State of New Jersey's Comprehensive Financial System and must be completed by non-procurement vendors/payees who intend to do business with the State of New Jersey. New Jersey State employees who are seeking reimbursement for travel or training expenses must register through Employee Self Service. Procurement vendors **SHOULD NOT** complete this form but should register at NJSTART.GOV. Procurement vendors include vendors who sell goods or provide a service (including healthcare and legal services). Please answer ALL questions and print clearly. If you have questions or need assistance completing the form, please contact vendor control at aaiunit@treas.nj.gov. Vendors should complete ALL parts of the form. NOTE: Incomplete forms will not be accepted.

Select the appropriate action that you are requesting. For payees that are registering for the first time, select 'Establish New Vendor.' For payees that have been previously established within the accounting system and want to add or change a remittance address, select the appropriate box.

PART I. REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

Part One is a W-9 form as required by the Internal Revenue Service to verify the name, address, and federal identification number for vendor/payees who may receive a 1099.

Questions 1-4:

If there is no preprinted data, populate the form with the vendor/payee's name (as shown on your tax return), address, city, state, zip code, and Taxpayer Identification Number. Sign and date the form under question number six.

If the form contains preprinted data and the preprinted information is correct, sign and date the form under question six.

If the form contains preprinted data and the preprinted information is not correct, cross out the incorrect data and make any changes immediately to the right of the preprinted information. Sign and date the form under question six.

Question 5: If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space any code(s) that may apply to you (See IRS Form W-9 instructions for codes).

Question 6: Sign and date the form.

PART II. VENDOR/PAYEE DATA: STATE OF NEW JERSEY VENDOR/PAYEE INFORMATION QUESTIONNAIRE

1. Enter the code that best describes the primary business function from the choices provided.

2. Print the name, phone number, and e-mail address of the primary contact person for the vendor listed in Part One.

If you manage a Confidential Fund or a Petty Cash Fund for a State agency, do not answer the remaining portion of the questionnaire (Questions three and four).

3. Enter the code that best describes your organization from the choices provided.

SUBMISSION OF THE STATE OF NEW JERSEY W-9/QUESTIONNAIRE

Mail or email completed forms to :

OMB-Vendor Control Unit
PO Box 221
Trenton, NJ 08625-0221

Email: aaiunit@treas.nj.gov

ACCESSING YOUR ACCOUNT INFORMATION

Details regarding specific payments, similar to a check stub, may be obtained over the internet through the Vendor Payment Inquiry (VPI) system. To access VPI, users must first create a 'MyNewJersey' portal account.

Begin by logging onto the State of New Jersey's web page, NJ.GOV and creating a log in and password (click on the 'Sign Up' link under the 'Login' tab). Once the 'MyNewJersey' portal account has been established, users will have to sign up for the VPI application by clicking the 'enroll here' button on our website, https://www-tyomb.nj.gov/TYM_VPI/home.

The online tutorial for VPI can be found at https://www-tyomb.nj.gov/treasury/omb/TYM_VPI/docs/GettingStarted.pdf. VPI provides two years of historical data (such as issuing agency, payee reference, payment amount, payment date, etc) and allows for the review of scheduled payments.

☐ **Establish New Vendor** ☐ **Establish Additional Remittance Address** ☐ **Change Remittance Address**

STATE OF NEW JERSEY

W-9/QUESTIONNAIRE FOR NON-PROCUREMENT VENDORS

THE STATE OF NEW JERSEY REQUIRES THE FOLLOWING INFORMATION TO ESTABLISH YOUR NAME, ADDRESS, AND TAXPAYER ID ON STATE RECORDS. THE INFORMATION IS USED TO POPULATE AND MAINTAIN THE STATE'S VENDOR/PAYEE FILE AND MUST BE COMPLETED BEFORE PAYMENTS ARE MADE.

NOTE: PROCUREMENT VENDORS SHOULD NOT COMPLETE THIS FORM BUT SHOULD REGISTER AT NJSTART.GOV.

IMPORTANT: YOU WILL NOT BE PAID BY THE STATE OF NEW JERSEY UNTIL THIS FORM IS COMPLETED, SIGNED, AND RETURNED. FOR ADDITIONAL INFORMATION EMAIL: AAIUNIT@TREAS.NJ.GOV.

Return completed form to:
OMB Vendor Control
PO BOX 221
Trenton, NJ 08625 -0221 or
Email: aaiunit@treas.nj.gov

PART I. REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

1. **Name** (as shown on your tax return):

   Doing business as (if different than name):

2. **Address**:

3. **City:** **State:** **Zip:**

   If the above contains preprinted data that is incorrect, cross it out and write the correct information immediately next to it.

4. **Taxpayer Identification Number (TIN)** Enter your TIN below and check the type of number listed.

   ☐ SOCIAL SECURITY NUMBER

   ☐ EMPLOYER IDENTIFICATION NUMBER

5. **Exemptions** (codes apply only to certain entities, not individuals; see IRS Form W-9 instructions page 3):
   Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____

6. **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 US person as defined by the IRS.
   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 of underreported interest or 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 IRA, and generally payments other than interest or dividends, you are not required to sign the certification, but you must provide your correct TIN.

Sign Here	Signature	Date

PART II. VENDOR/PAYEE DATA: STATE OF NEW JERSEY VENDOR/PAYEE INFORMATION QUESTIONNAIRE

NOTE: PROCUREMENT VENDORS SHOULD REGISTER AT NJSTART.GOV.

1. Enter the code from the list below that best describes your primary business function:

☐☐

NON-PROCUREMENT PAYEES:

AC=AUTHORITY/COMMISSION CF=CONFIDENTIAL FUND PC=PETTY CASH SD=SCHOOL DISTRICT FA=FEDERAL AGENCY FD=FIRE DISTRICT
CM=COUNTY/MUNICIPALITY SA=STATE AGENCY WB=WELFARE BOARD CU=STATE COLLEGE/UNIVERSITY

OTHER PAYEES:

OT=OTHER VENDOR (PLEASE SPECIFY - REQUIRED) _____

2. Primary Contact Information **(ALL FIELDS ARE REQUIRED):**

Name: _____Phone: _____ Email: _____

☐ Please check here if you are interested in receiving information about payments by direct deposit.

IF YOU ARE A NJ MANAGER OF A CONFIDENTIAL FUND OR PETTY CASH FUND, DO NOT ANSWER THE BALANCE OF THE QUESTIONAIRE.

3. Enter the code from the list below that best describes your organization

☐ C=CORPORATION I=INDIVIDUAL P=PARTNERSHIP L= LIMITED LIABILITY COMPANY G=GOVERNMENT

IMPORTANT: ANSWER ALL QUESTIONS (PRINT CLEARLY OR TYPE)