



## New Owner Forms

***Thank you for choosing Richey Property Management! We appreciate your business and look forward to the opportunity to serve you!***

The checklist below contains a list of forms that are required in order to complete your file and help us manage your property. Please don't hesitate to contact us if you have any questions.

**Once complete, please return these forms to:**

***Erika Sivertsen***

11870 Sunrise Valley Drive #201, Reston, VA 20191

703.463.9715 office • 703.537.5722 fax

[erika@richeypm.com](mailto:erika@richeypm.com) • [www.richeypm.com](http://www.richeypm.com)

Nbr	Form Name	Description	Complete
1	Management Agreement	Authorizes Richey Property Management to act on your behalf to manage the property. Outlines terms of agreement, including management fees.	
2	New Owner Contact Information	Provides RPM with your contact information (address, email, phone, emergency contact)	
3	Property Information Form	Provides RPM with information about utilities, existing maintenance contracts, etc. Some information provided here (e.g., location of mailbox, parking space) will be shared with your tenants.	
4	Utility Authorization Form	Authorizes RPM to open, close, or modify your accounts with utility providers. Please list all utility providers and account numbers on this form.	
5	Key & Fob Log	This form records the keys and access cards that are provided by owners to RPM.	
6	Automatic Deposit Authorization	Allows RPM to transfer monthly rental income (less expenses) into your bank account. A voided check should be attached to this form. Alternatively, you may use the online Owner Portal to set up and maintain your direct deposit information. Instructions are included in this packet. *Automatic transfer of funds is not required but is encouraged*	
7	Federal Form W-9	This form is required and must be received in our office before we can transfer your net rental income. It allows us to meet IRS reporting requirements.	
8	RPM Eviction Protection Plan	Program description and sign up form for the EPP we offer to our clients.	
9	RPM Team	Introduction and contact information for the RPM team.	
10	Home Owners Insurance Policy	Please provide a copy of your Homeowners policy or ask your agent to forward one to RPM on your behalf.	



## **RPM NEW OWNER CONTACT INFORMATION**

Owner(s): Oscar E. Ganteaume

Rental Property Address: 9419 Black Hawk Ct

Manassas Park, VA 20111

Owner Address: 6518 Kerns Road

Falls Church VA, 22044

Owner Work Address: 45195 Business Ct., Suite 100

Dulles, VA 20166

Owner Phone Numbers: H 703.532.1519

W 703.665.7259

C 703.655.3479

Fax

Time Difference

Owner Email Address(es): OegBizz@yahoo.com

Contact for Emergency Monika S. Mellem Phone: H 703.532.1519

Relationship Wife W 903.841.7324

Please complete this form as fully and accurately as possible.

Date: 03/25/2015

NAME(S): Oscar E. Ganteaume

Rental Property Address: 9419 Black Hawk Ct  
Manassas Park, VA 20111

**Richey Property Management adheres to the Fair Housing Law which states in part: "It is a violation of the Fair Housing Law...for any person to:**

- 1. Deny housing accommodations to any person because of race, color, religion, ancestry, national origin, sex, marital status, age, familial status, children, elderliness, sexual orientation, or handicap.**
- 2. Discrimination against any person based on the above noted classes with respect to the terms, conditions, or privileges of housing accommodations or in the furnishing of facilities or services in connections herewith.**

In view of the above, we cannot accept property for management which does not conform to the provisions of the law.

- A. Term available: Maximum month/years: \_\_\_\_\_ Minimum month/years: 1 year
- B. Reverse Diplomatic/Military Clause Required (60 day notice by the first of the month)  
☐ Yes ☐ No Approximate return date: \_\_\_\_\_
- C. Will you accept fur-bearing pets? ☒ No ☐ OWC Minimum pet deposit: \$ 1695  
Restrictions \_\_\_\_\_

**3. DISBURSEMENT OF FUNDS**

- A. Property Taxes \_\_\_\_\_ RPM to Pay ☐ Yes ☒ No
- B. Insurance \_\_\_\_\_ RPM to Pay ☐ Yes ☒ No

**4. INSURANCE COVERAGE: (Homeowner's Policy must be converted or amended to a Landlord/Tenant Policy)**

***Please have company forward a copy of the policy to RPM***

Fire, Liability, and Comprehensive:

Company: Stillwater

Policy Number: ND2002150

Agent: \_\_\_\_\_

Phone: 800-691-3817

## 5. HOMEOWNER OR CONDO ASSOCIATION: (Please leave a copy of hour HOA/Condo rules in property)

A. Name of HOA/Condo Blooms Crossing Assn Move In/Out Fee \$ \_\_\_\_\_  
 Address: c/o Cardinal Management Group Contact: \_\_\_\_\_  
P.O. Box 71209 Phone: 703-569-5797  
 Parking Space # 19 How Many? 3  
 Parking Decal Required? ☐ Yes ☒ No Placement on car: \_\_\_\_\_  
 Parking Restrictions? Do not park on a numbered spot  
 Mailbox # 6 Mailbox Location Across the street # of Keys 2  
 Storage Bin # \_\_\_\_\_ Storage Location \_\_\_\_\_ # of Keys \_\_\_\_\_  
 Building Entry: Key \_\_\_\_\_ Code \_\_\_\_\_ Swipe Card \_\_\_\_\_ Garage Opener 1  
 Unit/Home Security System: Code \_\_\_\_\_  
 If unit is in a condominium, Pet Restrictions: \_\_\_\_\_

RPM to Pay: ☐ Yes ☒ No ☐ Monthly ☐ Quarterly ☐ Yearly  
 Account #: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Begin: \_\_\_\_\_

B. Name of Cluster or Association \_\_\_\_\_  
 Address: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 RPM to Pay: ☐ Yes ☐ No ☐ Monthly ☐ Quarterly ☐ Yearly  
 Account #: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Begin: \_\_\_\_\_

## 6. SWIMMING POOL:

Part of HOA/Condo? ☐ Yes ☐ No  
 Tenant pays any fees? ☐ Yes Fees \$ \_\_\_\_\_ ☐ No  
 Number of pool passes: \_\_\_\_\_  
 Name: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 If separate fee, RPM to pay? ☐ Yes ☐ No Amount \$ \_\_\_\_\_ When due? \_\_\_\_\_

## 7. UTILITIES/SERVICE PROVIDERS

A. Electric Co.: NOVEC  
 B. Water Co.: City of Manassas Park  
 C. Sewer Co.: City of Manassas Park  
 D. Gas Co.: Washington Gas  
 E. Oil Co.: \_\_\_\_\_  
 F. Telephone: Verizon, Comcast  
 G. Trash: City of Manassas Park  
 Pick up days: \_\_\_\_\_  
 Recycling Information/Pick up days: Wednesdays  
 H. Cable: Verizon, Comcast

- I. Satellite: \_\_\_\_\_
- J. Septic (Firm to call if system malfunctions): \_\_\_\_\_ Phone: \_\_\_\_\_
- K. Lawn Service \_\_\_\_\_ Phone: \_\_\_\_\_
- L. Irrigation Service \_\_\_\_\_ Phone: \_\_\_\_\_
- M. Cleaning Service \_\_\_\_\_ Phone: \_\_\_\_\_
- N. Security Service \_\_\_\_\_ Phone: \_\_\_\_\_

Owner shall be responsible for the payment of the following utilities/services to the premises:

☐ Electric ☐ Gas ☐ Water ☐ Trash ☐ Sewer ☐ Cable/Satellite TV ☐ Telephone

Other: \_\_\_\_\_

Tenant shall be responsible for the payment of the following utilities/services delivered to the leased premises:

☒ Electric ☒ Gas ☒ Water ☒ Trash ☐ Sewer ☒ Cable/Sattelite TV ☒ Telephone

Other: \_\_\_\_\_

8. MAIN WATER shut-off location: AC/Water heater closet
- Front exterior shut-off location: AC/Water heater closet
- Rear exterior shut-off location: AC/Water heater closet
- Septic/well location (if applicable): \_\_\_\_\_

9. FIXTURES AND APPLIANCES The Landlord shall provide as part of the Premises all existing built-in heating and central air conditioning equipment, plumbing, and lighting fixtures, sump pump, attic fan, storm windows, storm doors, screens, installed wall-to-wall carpeting, smoke and heat detectors, exterior trees and shrubs and, if so indicated below, the following fixtures and appliances:

PROVIDED		PROVIDED		PROVIDED	
Yes	No	Yes	No	Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/> Stove or Range Gas/Elec	<input checked="" type="checkbox"/>	<input type="checkbox"/> Hot Water Heater Gas/Elec	<input type="checkbox"/>	<input checked="" type="checkbox"/> Alarm System
<input type="checkbox"/>	<input checked="" type="checkbox"/> Cooktop Gas/Elec	<input checked="" type="checkbox"/>	<input type="checkbox"/> Washer	<input type="checkbox"/>	<input checked="" type="checkbox"/> Intercom
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wall Ovens #__ Gas/Elec	<input checked="" type="checkbox"/>	<input type="checkbox"/> Dryer	<input checked="" type="checkbox"/>	<input type="checkbox"/> Carpeting
<input type="checkbox"/>	<input checked="" type="checkbox"/> Built-in Microwave	<input type="checkbox"/>	<input checked="" type="checkbox"/> Window A/C(s) # _____	<input type="checkbox"/>	<input checked="" type="checkbox"/> Window Treatments
<input checked="" type="checkbox"/>	<input type="checkbox"/> Exhaust Fan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Ceiling Fan(s) # <u>1</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Hardwood Floors
<input checked="" type="checkbox"/>	<input type="checkbox"/> Refrigerator	<input type="checkbox"/>	<input checked="" type="checkbox"/> Furnace Humidifier	<input type="checkbox"/>	<input checked="" type="checkbox"/> Hardwood Floors
<input checked="" type="checkbox"/>	<input type="checkbox"/> Icemaker	<input type="checkbox"/>	<input checked="" type="checkbox"/> Electronic Air Filter	<input checked="" type="checkbox"/>	<input type="checkbox"/> (Polyurethane)
<input checked="" type="checkbox"/>	<input type="checkbox"/> Dishwasher	<input type="checkbox"/>	<input checked="" type="checkbox"/> Dehumidifier	<input type="checkbox"/>	<input type="checkbox"/> Hardwood Floors
<input checked="" type="checkbox"/>	<input type="checkbox"/> Disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/> Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/> (Waxed)
<input type="checkbox"/>	<input checked="" type="checkbox"/> Extra Refrigerator	<input type="checkbox"/>	<input checked="" type="checkbox"/> Water Softener	<input type="checkbox"/>	<input checked="" type="checkbox"/> Hot Tub Equip., Cover
<input checked="" type="checkbox"/>	<input type="checkbox"/> Freezer	<input type="checkbox"/>	<input checked="" type="checkbox"/> Auto Garage Door(s) # <u>1</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Satellite Dish
<input type="checkbox"/>	<input checked="" type="checkbox"/> Trash Compactor	<input type="checkbox"/>	<input checked="" type="checkbox"/> Garage Opener(s) # <u>1</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Cable Ready

As-is items: \_\_\_\_\_

## 10. MAINTENANCE AND REPAIRS:

Is tenant responsible for:

☒

Mowing front/back/both

☐

Gutter cleaning

☐

Pool/spa opening/closing

☒

Leaf removal

☐

Wood fireplace cleaning

☒

Replacing furnace filters

on a regular basis

 11. SPECIAL INSTRUCTIONS: Use hardwood cleaning products on the first floor

12. Owner shall inform Agent and provide documents of any contracts, covenants, and/or regulations that would effect a tenant's occupancy, as well as information considering any special move-in rules, maintenance, key service, security, intercoms, parking, storage, etc.

13. Provide copies of any current contracts (e.g., lawn care, HVAC, home warranties, termites, appliances, pools). Please list contracts below:

Vendor	Phone #	Account #

14. Owner authorizes RPM to use any of their preferred licensed vendors unless there is an existing current contract (noted above) with another vendor. Provide contact information for preferred/tested vendors below:

Vendor	Phone #	Contact Name

 \_\_\_\_\_  
 Property Manager

 \_\_\_\_\_  
 Owner

 \_\_\_\_\_  
 Owner



## AUTOMATIC NAME CHANGE CONTRACT

This agreement, effective this 17 day of February, is by and between Washington Gas Light Company (WG) and Oscar E. Ganteaume (Manager / Owner of Property).

Whereas, Manager is the owner or manager of an apartment building or single-family dwelling located at 9419 Black Hawk Ct., Manassas Park, VA 20111 (see attached list if more than one); and

Whereas the tenants receive individual gas service from WG in their own names, and

Whereas, Manager would like to continue gas service during those periods when the property is vacant, but not pay service initiation fees, and

Whereas WG will benefit from not having to turn the gas service off and then on again within a short period,

Now therefore the parties agree as follows:

When a tenant at the property notifies WG that the tenant will move out of the property, WG will automatically transfer the service to Manager's name, without imposing a service initiation fee. The date of the transfer will be the date requested by the tenant, and any disputes about the date of transfer will be resolved between the tenant and Manager. Manager will be responsible for paying the bill until WG transfers the service to the name of the new tenant. Automatic service transfers will not occur if the gas service at the property is discontinued for non-payment.

Manager may discontinue service to a particular property only by sending WG a written notice requesting such discontinuation, and scheduling a meter reading date. Manager is responsible for providing access to the meter on the reading date.

This agreement shall be for an initial term of one year, beginning on the date first written above, and shall continue on a month to month basis until terminated. Either party may terminate after the initial term, by providing a written notice of termination to the other party, such termination to be effective on the next regular meter reading date after the notice is received and processed.

WG may terminate for cause if Manager requests termination of service to individual apartments or single-family dwellings more than two times in a twelve-month period.

Notices are to be sent to:

Washington Gas  
6801 Industrial Rd.  
Springfield, VA 22151  
Attn: ANCP Desk

### Billing Information:

Billing Name: Oscar E. Ganteaume

c/o: Richey Property Management, LLC

Street Address: 11870 Sunrise Valley Drive Suite #201

City, State & Zip: Reston, VA 20191

In witness whereof, the parties, intending to be bound, have executed this Agreement.

Manager:

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature of Officer, Agent, Property Owner      Date      Title or Representative Capacity

\_\_\_\_\_  
Printed Name of Officer, Agent, Property Owner      Business Phone      /      Home Phone w/Area Codes

Washington Gas:

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature of Washington Gas Representative      Date      Title or Representative Capacity

# PROPERTY OWNER AGREEMENT

## *For Natural Gas Accounts just*

WHEREAS: \_\_\_\_\_, hereinafter referred to as "Landlord" is the owner of one or more rental units as identified on Exhibit "A" ("Owner Units") attached hereto and made a part hereof, receiving service from Columbia Gas of Virginia, Inc. ("Columbia") and;

WHEREAS, Landlord wishes to maintain continuous gas service to such Owner Units upon and after the effective date of a service disconnect ordered for any of such Owner Units and during the period when any of such Owner Units are not occupied by current Columbia customer(s);

NOW THEREFORE, in consideration of the mutual agreements contained herein;

1. Landlord agrees to be responsible for the payment for all gas service rendered to Owner Units during such periods when the service is in the Landlord's name, upon the effective date of a disconnect ordered by a tenant and continuing up to the connect date for the initiation of natural gas service established by Columbia for a new tenant, when such new tenant makes application for service with Columbia.
2. Landlord agrees to provide Columbia complete and entire access to each Owner Unit when a tenant vacates.
3. Landlord agrees to provide Columbia, when available and upon request, the forwarding addresses of all prior tenants for each Owner Unit.
4. The Landlord is required to notify Columbia if any of the Owner Units are sold, in order for Columbia to remove the account (s) for such Owner Units from this Agreement. If such notification is not made, the Landlord agrees to be responsible for the payment for all gas service rendered under this Agreement until this Agreement is cancelled or amended in writing.
5. Columbia agrees to continue its service to such Owner Units, in compliance with its tariff and subject to Landlord's obligation to properly maintain customer service and house lines, and to transfer to Landlord the billing upon the effective date of a disconnect ordered for such Owner Unit or when such Owner Unit is not occupied by a current Columbia customer in accordance with this Agreement.
6. It is mutually understood and agreed that it is the purpose of this Agreement to maintain continuous natural gas service at Owner Units in the event of what would otherwise be the discontinuance of service by reason of a disconnect placed by a tenant, and that this Agreement does not extend to discontinuance of service by reason of non-payment by a tenant, nor will Columbia notify said Landlord of same unless required by law to do so, nor extend the obligations of Columbia to the Landlord beyond those provided by law.
7. Landlord agrees to provide the complete address, including city and state, of all properties, to be covered under this Agreement.
8. Columbia reserves the right to cancel this Agreement upon written notification as a result of a delinquent balance for any such Owner Units covered by this Agreement in Exhibit "A".
9. All property listed in Exhibit "A" will be binding to this Agreement upon receipt of completed and signed Agreement in Columbia's offices.
10. This Agreement shall be subject to the terms and conditions of Columbia's tariff, as well as all applicable laws and regulations affecting natural gas service in the state of Virginia.

\_\_\_\_\_  
*Property Owner*

\_\_\_\_\_  
*Month Day Year*

COLUMBIA GAS VIRGINIA, Inc.

\_\_\_\_\_  
*Completed By Effective Date*





Exhibit "A"  
**LISTING OF ACCOUNTS COVERED BY  
PROPERTY OWNER AGREEMENT**

**MAIL BILLS TO:**

NAME c/o Richey Property Management, LLC SS# OR TAX ID# \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

c/o Richey Property Management, LLC 11870 Sunrise Valley Drive Suite #201, Reston, VA 20191

MAILING ADDRESS (if different from home address) \_\_\_\_\_

(703) 463-9715  
PHONE NUMBER

(703) 463-9715  
BUSINESS PHONE

info@richeypm.com  
E-MAIL ADDRESS

IN MY ABSENCE CONTACT Richey Property Management, LLC PHONE NUMBER (703) 463-9715

TO GAIN ENTRANCE TO MY PROPERTIES FOR TRANSFER OF BILLING. \_\_\_\_\_

ADDRESS	APT NO	CITY	STATE	(Office Use) PSID NUMBER



### **UTILITY AUTHORIZATION FORM**

Owner(s): Oscar E. Ganteaume

Rental Property Address: 9419 Black Hawk Ct.

Manassas Park VA, 20111

The property owner authorizes Richey Property Management to **Open, Close, or Modify** the accounts listed below with the named utility providers. Richey Property Management will also have the right to inquire as to the account status on behalf of the owner.

Utility Name	Utility Account Number
Washington Gas	

Signature of Owner(s): \_\_\_\_\_

Printed Name of Owner (s): Oscar E. Ganteaume

Phone Number of Owner(s): 703.532.1519

Date: 03/25/2015

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**PROPERTY KEY LOG****Property Address:** 9419 Black Hawk Ct.Manassas Park VA, 20111**Owner Name:** Oscar E. Ganteaume**The following keys, fobs, passes & remotes have been given by Owner to RPM:**

<b>Front Door</b>	<b>2</b>	<b>Building Keys/FOB</b>	
<b>Back Door</b>		<b>Gate Keys</b>	
<b>Garage Door Keys</b>		<b>Storage Unit #-Keys</b>	
<b>Garage Opener</b>	<b>1</b>	<b>Storage Lock</b>	
<b>Garage Code</b>		<b>Parking Pass</b>	
<b>Mailbox #-Keys</b>	<b>2</b>	<b>Visitor Pass</b>	
<b>Fireplace Remote</b>		<b>Elevator Keys</b>	
<b>Ceiling Fan Remote</b>		<b>Fitness Facility</b>	
<b>Other</b>		<b>Pool Pass</b>	

**Notes:**  

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**RPM Signature:** 

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**Date:** 

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*The Richey Property Management Owner Portal allows owners access to monthly reports and information. It also allows owners to set up and maintain direct deposit information. It is available online 24/7.*

*The Owner Portal and the Direct Deposit service are offered to property owners at no additional charge.*

### **Accessing the Owner Portal**

1. Navigate to [richeypm.com](http://richeypm.com) using your web browser.
2. Click on the word "Owners" on the left side of the screen.
3. Enter your email and password and click "Sign In" OR
4. Click the orange "Sign Up" button to request an account. A temporary password will be sent to your email address. Temporary passwords are system generated and often contain special characters. They are case sensitive.

Please note – if the email address you enter does not match the one we have on file for you, approval may be delayed but should be received within one business day.

### **Enter Direct Deposit Information**

1. Once signed in to the system, the "My Account" page will display the information we have on file for you. Click "View Detail" in the light blue "My Contact Information" bar.

**My Contact Information**

[View Detail](#) [Edit](#) [Change Email/Password](#)

Please note that you may update your contact information and/or portal password at any time using the other links shown above.

2. Select "E-Check" under "Payment Method" and click the orange "Save" button.

#### Payment Method

☐ ☒ None
 ☒ ACH E-Check

3. Enter your bank account information exactly as it appears on your check and click "Save".

**Important Note:** Please verify that your account and routing numbers are correct. If this information is not entered correctly, funds may be deposited into the wrong account.

#### Payment Method

☐ ☒ None
 ☒ ACH E-Check

Please enter your bank account information exactly as it appears on your check. ACH payments submitted without accurate routing and account numbers will be not be processed and subject to a non-sufficient funds fee.

Bank Name   
 Account Type   
 Routing Number   
 Account Number

Routing Number    Account Number    Check Number

SSN/SIN

OR

Drivers License #   
 Drivers License State/Province

#### Billing Information

☐ Same as Contact

Billing Address   
 Address 2   
 City   
 State/Province   
 Zip/Postal Code   
 Billing Email

4. You may return to the Owner Portal at any time to update your banking information.



**AUTOMATIC DEPOSIT AUTHORIZATION**  
**(Please Attach a Voided Check)**

\_\_\_New      \_\_\_Change      \_\_\_Termination

Account to Be Credited

Name(s) on Account \_\_\_\_\_

Bank Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Bank Phone Number: \_\_\_\_\_

Account Type: \_\_\_\_\_Checking      \_\_\_\_\_Savings

Account Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_

I/We authorize Richey Property Management, LLC (the Company), to initiate credit entries and, if necessary, to initiate any debit entries to correct an erroneous credit entry to my/our account at the financial institution listed above for the purpose of automatically depositing funds as indicated above. I/We acknowledge that the origination of these transactions must comply with the provisions of U.S. law.

I/We understand that this authorization replaces any previous authorization and will remain in full force and effect until the Company has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Company and financial institution a reasonable opportunity to act on it.

Name(s) (Print or Type) \_\_\_\_\_

\_\_\_\_\_  
Signature: (date)

\_\_\_\_\_  
Signature (date)

*Attach VOIDED check here or send on separate page*

**W-9**

**Request for Taxpayer  
Identification Number and Certification**

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

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership  
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ .....  
☐ Other (see instructions) ▶

☐ Exempt  
payee

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

List account number(s) here (optional)

**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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

or

Employer identification number

**Note.** If the account is in more than one name, see the chart on page 4 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).

**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 4.

**Sign  
Here**

Signature of  
U.S. person ▶

Date ▶

**General Instructions**

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

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of 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.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,



- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

**Limited liability company (LLC).** Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

For an LLC classified as a partnership or a corporation, enter the LLC's name on the "Name" line and any business, trade, or DBA name on the "Business name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note.** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

### Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the business name, sign and date the form.



Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [www.irs.gov](http://www.irs.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

**Signature requirements.** Complete the certification as indicated in 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Disregarded entity not owned by an individual	The owner
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

## Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

### Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.consumer.gov/idtheft](http://www.consumer.gov/idtheft) or 1-877-IDTHEFT(438-4338).

Visit the IRS website at [www.irs.gov](http://www.irs.gov) to learn more about identity theft and how to reduce your risk.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.



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## **RPM Eviction Protection Plan**

As the current economic times have continued to impact our community, we have noticed that the number of rental payment delinquencies and non-payment of rent cases have increased dramatically. When we have to evict a tenant for non-payment of rent, the costs are excessive. An eviction puts an extreme financial hardship on the landlord. The problem is that the landlord is typically evicting for non-payment of rent, so he/she has not received rent for at least one month (or more, depending on the court date), but he/she is now burdened with the additional cost of the eviction which must come out of his/her pocket. What's worse is that spending the money required for the eviction process is a necessary evil and although in a successful eviction a judgment will be awarded to the landlord, the reality is that the judgment will probably never be collected. This simply adds to the hardship of the landlord. This is why we are proud to offer the Eviction Protection Program!

In a non-contested simple non-payment of rent unlawful detainer (eviction) action, the costs can add up quickly. The current cost of this process ranges between \$750-\$1,200 including attorney fees, court costs, sheriff fees and our fees for the preparation of the court case, our court appearance to defend you and act on your behalf, to coordinate and meet the locksmith and the sheriff at the lockout time, etc. That is a large sum to come out of pocket with when you already have not received your rent payment.

However, for the small fee of \$10.95 per month, Richey Property Management will cover up to \$1,200 of these costs for you in the event of a simple non-payment of rent eviction action.

Please see the attached chart for eligibility requirements. This is especially important for properties where the application review was done by another company prior to our management. Higher fees may apply.

If you choose to opt-out of this program, you will not be covered and will be responsible for the entire amount of court costs, attorney fees, sheriff fees, etc. should an eviction be required.

We are pleased to bring you this new program that helps mitigate your financial risk. If you have any questions, please contact us.



11870 Sunrise Valley Drive #201, Reston, Virginia 20191  
703.463.9715 office • 703.537.5722 fax  
[www.richeyprpm.com](http://www.richeyprpm.com)





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## **RPM Eviction Protection Plan Addendum**

### Property Management Agreement Addendum

Participation in the plan is \$10.95 per unit per month in most cases (see attached Coverage Eligibility form). If a simple forcible detainer (eviction) action is required, Richey Property Management agrees to pay the legal fees, court costs, sheriff fees and other fees associated with Richey Property Management preparing for the court appearance, making the court appearance and meeting the sheriff to serve the writ of possession in unlawful detainer, up to a maximum of \$1,200. Richey Property Managements' time will be billed at its hourly rate at the time of the eviction action. However, should the tenant appeal the unlawful detainer (eviction) action, the Owner agrees that Richey Property Management will not be responsible to pay any costs incurred to litigate the case and the Owner will be billed preparation fees by Richey Property Management at the standard hourly rate. The Eviction Protection Plan shall only be valid while the management agreement is in effect and while the monthly fee is paid.

☐ I want to **sign up for** the RPM Eviction Protection Plan

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Owner Printed Name(s)

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Owner Signature(s)

Date

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Property Address



11870 Sunrise Valley Drive #201, Reston, Virginia 20191  
703.463.9715 office • 703.537.5722 fax  
[www.richeypr.com](http://www.richeypr.com)





**RICHEY**  
PROPERTY MANAGEMENT, LLC

## **RPM Eviction Protection Coverage Eligibility**

<b>RPM Applicant Rating</b>	<b>Coverage Plan</b>	<b>Cost</b>
"Approve" Rating	Full Coverage from Day 1	\$10.95
"Caution" Rating	Bill from Day 1, 4 month Probation. Refund if Tenant Rent Default is within 4 months	\$10.95
"Deny" Rating (All at RPM's discretion)	Bill from Day 1, 6 month Probation. Refund if Tenant Rent Default is within 6 months	\$15.95
Non Reviewed Tenant (All at RPM's discretion)	If new to RPM- treat like "Deny"	\$15.95
	If pre-existing with RPM- must meet 6 months payment history with 1 or less late payments that are <7 days late.	\$10.95



Date: \_\_\_\_\_

Owner: \_\_\_\_\_

Property: \_\_\_\_\_

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Notes:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.