



DOING BUSINESS WITH Parks & Police for Kids

Required Documents and Forms

New vendors are required to complete the attached forms and provide additional required documentation as noted.

Vendor is responsible for ensuring it has met all federal, state, and local requirements for operation of its business in the State of Florida Miami-Dade County and the City of Doral. Vendors operating on City park property are subject to review of pertinent licensing, certifications, and inspection reports. A Vendor found not to be in compliance with federal, state, and local business requirements will have its Registered Vendor status suspended until such time as it can demonstrate compliance.

- Local Business Tax Receipt (County/ City) – In accordance with Florida Statute 205.053 - Business tax receipts; dates due and delinquent; penalties. A BTR must be submitted each year for firms located within the tri-county area (Miami-Dade, Broward and Palm Beach Counties). This is applicable to home based businesses as well where applicable.
- W9 – A completed IRS W-9 form must be signed annually at the beginning of the new year (January).
- Proof of insurance (if applicable) – Any work being completed on City property requires a COI.

If any information changes, it is the vendor's responsibility to provide PP4K with updated documents.



VENDOR APPLICATION

Business Name: _____

D.B.A.: _____

Federal I.D. No.: _____ Date Business Established: _____

Business is: ☐ Corporation ☐ Proprietorship ☐ Partnership ☐ LLC Other: _____

Address: _____

City: _____ State: _____ Zip: _____

Pay to Address: _____

City: _____ State: _____ Zip: _____
(if different)

Telephone: (_____) _____ Fax: (_____) _____

Email Address: _____ Website URL: _____

Contact: _____ Email: _____ Title: _____

Contact: _____ Email: _____ Title: _____

Contact: _____ Email: _____ Title: _____

All applicants are required to provide a copy of their Occupational License(s)/ BTR as well as a Certificate of Insurance with PP4K as the certificate holder.

Please return the completed Vendor Application including the Local Business Tax Receipt (County/ City), updated W9 and proof of insurance (if applicable) to alfred.pereira@cityofdoral.com.

The undersigned does hereby certify that the foregoing and subsequent statements are true and correct.

Print Name: _____ Title: _____

Signature: _____ Date: _____