

**Re: Certificate of Insurance and W-9**

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All vendors are required to maintain specific insurance before coming onto the property. And if applicable being issued your first check for payment. Please forward an up-to-date original copy of your Certificate of Insurance, which names the following as additional insured:

**(Owner name...),  
and  
Pepitone Properties Corp.**

Please contact your insurance agency to ensure the issuance of a current certificate as soon as possible.

Please forward this certificate, making certain the below listed items are included:

1. Policy Effective Date
2. Policy Expiration Date
3. Policy Number
4. Coverage Amounts
5. Description of Operation to read:  
**Certificate holder is listed as additional insured with respect to general liability.**
6. Certificate Holder listed as following:  
**(Owner name...), and  
Pepitone Properties Corp.  
8890 Salrose Lane, Suite 200  
Fort Myers, FL 33912**

In addition to the above, please forward a completed W-9 form. A blank is enclosed for your convenience.

If you have any questions, please feel free to contact the management office at (239) 481-5959.

**INSURANCE REQUIREMENTS FOR 5592 Lee St., Lehigh Acres, FL**  
**Westgate Industrial Park**

Contractor or subcontractor must provide all of the following prior to commencement of any work. Any changes from the following must receive written approval from Building Management.

- A. Contractor shall defend, indemnify and hold harmless **Gerard Pizzuit.**, (as owner), **Pepitone Properties Corp.** (as Property Manager) and subsidiary or affiliate companies or corporations and employees of same against and from all claims, damages, losses, and expenses, including attorney fees, by reason of injury or death to persons or damage to property (including the work itself) and including the loss of use, claim to have arisen out of or resulted from the act or omission of the contractor, any sub-contractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable excepting such liability as may result from the sole negligence of the owner. Contractor's obligation shall not be limited in any way by any limitation by the amount or types of damage, compensation or benefits payable by or for disability acts or other employee benefit acts, including coverage for below noted indemnity agreement in such companies as may be approved by the Owner.
- B. The Contractor agrees to maintain the following insurance policies in full force and effect in insurance companies licensed in the State of Florida and acceptable to the General Contractor.
1. **Commercial General Liability Insurance** with a minimum of \$1,000,000 Combined Single Limit of Bodily Injury and Property Damage per occurrence, and a \$2,000,000 general aggregate per project and a \$1,000,000 Products/Completed Operations aggregate.
  2. **Business Owners Auto Liability Insurance** covering all owned, leased, hired or borrowed vehicles with a \$1,000,000 Combined Single Limit of Liability.
  3. **Workers Compensation and Employees Liability Insurance** or valid exemption form on file with the State of Florida, for construction businesses to cover the individual owner only. The contractor shall not permit any holder of an exemption on the site.
  4. **Catastrophe Liability Insurance** with a minimum of \$1,000,000 Combined Single Limit of Bodily Injury and Property Damage. The Contractor will file with the General Contractor, if applicable or Certificates of Insurance prior to commencement of the work. Such Certificates will show the General Contractor, Property Manager, and Building Owner as additional insured's under 1, 2, and 4 above. The Certificate will provide 30 days written Notice of Cancellation without a disclaimer.
- C. The limits of insurance required do not limit the Contractor's liability under the Indemnity Clause.

**Please provide two separate current certificates of insurance as noted above for the all items as noted.**

**The certificate binders must show the following as certificate holders:**

Certificate Holder #1:  
Property Owner  
8890 Salrose Lane, Suite 200  
Fort Myers, FL. 33912

Certificate Holder #2  
Pepitone Properties Corp/Viking Maintenance  
8890 Salrose Lane, Suite 200  
Fort Myers, FL. 33912

PLEASE CALL IF YOU HAVE ANY TROUBLE WITH THE NOTED INSURANCE AMOUNTS OR ANY OR  
COMMENTS.

Mail or Fax Certifications to:

**PEPITONE PROPERTIES CORP.**

8890 Salrose lane, Suite 200, Fort Myers, FL 33912

(239) 481-5959 phone  
(239) 481-0409 fax  
info@pepitonerealty.com

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

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>									
OR									
<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 on page 3.

<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.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/w9](http://www.irs.gov/w9).

#### 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?* on page 2.

By signing the filled-out form, you:

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, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.