

### **Independent Contractor Equipment Application**

Owner Name:		Agency:	
Address:			
Phone:	SSN/FID		
DRIVER INFORMATION	<b>ON</b> The owner is the driver		
Name:		·····	
Address:			
Phone:	SSI	N/FID	
	from the driver Greatwide Truckload Managing paid by 🔲 1099 or 🔲 W-2. This form i	gement (GWTM) will need to know in writing from the s not acceptable notice.	
TRACTOR INFORMAT	TION		
TADC / Day Cab	VIN#		
TASC / Sleeper	YearColor		
Hotshot / Pick-up	Make		
Straight Truck	Model		
Other	Odometer		
TRAILER INFORMATI	<u>ON</u>		
I have my own traile I have attach	e Truckload Management trailer:	☐ Flatbed ☐ Specialized  Make	
Vin			
Name	ienholder information (if applicable):		
Address			
inspection and the rece	e inspected by a GWTM approved inspeript must be submitted to the Safety Depart lavalid inspection completed in the:  (2) weeks, if yehicle was manufactured prior		

PLEASE FAX BACK TO 215-827-5747, Attn: Licensing and Reciprocity

Last month, if vehicle was manufactured after 2002.



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REGISTRATION (2 choices)
<ul> <li>I have my own registration. (You must proved a copy of your cab card with this form.)</li> <li>I need a plate through Greatwide Truckload Management. (You need the following.)</li> </ul>
1. Front and back of a clear title, <b>IN LESSEE'S NAME</b> , or original title for ownership transfer ( <b>must be within 30 days</b> If the title is in another name, a lease between lessee and lessor must be provided showing authorization t sub-lease the unit. If there is writing on the back of the title GWTM will need the original title to process the plate
2. A current 2290 form (Schedule 1) with paid stamp from IRS.
3. An original notarized limited power of attorney allowing GWTM to sign for Lessee.
Purchase Date (Required)
Purchase Price (Required)
Unladen (empty) weight (Required)
Tire Size (Required)
Please provide Lienholder information (if applicable):
Name:
Address:
INSURANCE INFORMATION
Occupational Accident: 🔲 Yes, I need insurance through GWTM.
No, I have my own and will have my insurance agent fax a certificate naming
GWTM as certificate holder.
Bobtail / Non-Trucking: 🔲 Yes, I need insurance through GWTM.
No, I have my own and will have my insurance agent fax a certificate naming
GWTM as certificate holder (must be a \$1,000,000 policy).
Physical Damage Tractor (Optional): 🔲 Yes, I want insurance through GWTM.
Declared Value (must be greater than \$15K)
☐ No, I do not want the optional insurance.
Physical Damage Trailer (Optional): 🔲 Yes, I want insurance through GWTM.
Declared Value (must be greater than \$7500)
No, I do not want the optional insurance.
TRUXPRO (Optional Physical Damage Required): 🔲 Yes
□ No
Deductible Buy Back (Optional Physical Damage Required): 🔲 Yes
□ No
PERMIT INFORMATION
All state permits for fuel tax will be ordered for all equipment leased to Greatwide Truckload Management (if applicable to include: KY, NY, NM, and OR.
Truck Owner Signature Date
PI FASE FAX BACK TO 215-827-5747. Attn: Licensing and Reciprocity

#### Form W = 9 (Rev. November 2005) Department of the Treasury

# Request for Taxpayer Identification Number and Certification

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

	Revenue Service		Seria to the ins.		
ge 2.	Name (as shown on your income tax return)				
s on page	Business name, if different from above				
Print or type Specific Instructions	Check appropriate box: ☐ Individual/ ☐ Corporation ☐ Partnership ☐ Other ►		Exempt from backup withholding		
	Address (number, street, and apt, or suite no.)	Requester's name and address (optional)			
	City, state, and ZIP code				
See 5	List account number(s) here (optional)				
Part 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.  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					
	penalties of perjury, I certify that:				
	ne number shown on this form is my correct taxpayer identification number (or I am waitin				
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. person (including a U.S. resident alien).					
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		Date ►			

#### 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.

U.S. person. 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
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, 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.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States.
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

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,