

Integrated Reality Resources, LLC 8025 South Willow St, Stite 205 Manchoster, N= 05/03

VENDOR REGISTRATION FORM

Date:		
Vendor Information:	Vendor Nam	ıe:
	Address:	
	Owner/Cont	act:
	Email:	
	Telephone:	
	Tax ID #:	
	List any specialized equipment or scope of service:	
Required Documentation:		
W-9 - All vendors must pro	ovide Integrated Rea	alty Resources, LLC with a completed W-9 prior to starting any work.
		equired to provide IRR with certificate of insurance prior to working on any of ation shall meet the following specifications:
Coverage:	Commercial	General Liability \$1,000,000 each occurrence \$2,000,000 General Aggregate
Business Automo	bile Liability:	\$1,000,000 combined single limit
Workers Compensation:		\$ 500,000
Certificate Holder:		Integrated Realty Resources, LLC 8025 South Willow Street, Suite 209 Manchester, NH 03103
		N OF ENDORSEMENTS/OPERATIONS: Integrated Realty Resources, LLC General Liability covering all properties and owning entities managed by

Integrated Realty Resources, LLC and serviced by -Vendor Name-

Please return this form along with the Insurance Certificates and W-9 to office.admin@irr-re.com

To ensure timely processing, please send all invoices to accounting@irr-re.com.