

Dear Valued Business Partner,

HollyFrontier and HEP have implemented a policy of using a Vendor Authorization form.

## Fill out the Vendor Authorization Form in three easy steps:

- 1. Complete the <u>Vendor Authorization Form</u>.
- 2. Have the form <u>signed</u> by your company's designated signing officer.

Please note – Licensed DocuSign signatures are acceptable. All other forms of <u>electronic</u> signatures are not acceptable.

3. <u>Scan</u> the form in PDF format and <u>email</u> it back to the HollyFrontier or HEP representative who provided you this form.

In addition to the completed Vendor Authorization Form, we also require the following document:

• Copy of your Company W-9

## Please complete both sections of form (Vendor and Banking) for new vendor set ups and any type of banking change.

## Please only complete top section of form (Vendor) for address changes.

For more information about the Vendor Authorization Form process, contact your HollyFrontier or HEP representative.

Thank you for your assistance with this policy.





Vendor Information				
Vendor Name: Town of Saratoga-Never Forget Park		HFC or HEP Vendor #:		
Vendor Address (must match W-9): 110 E. Spring Street	City: Saratoga		State: WY	<b>Zip:</b> 82331
Remit To Mailing Address (check only): P.O. Box 486	<b>City:</b> Saratoga		State: WY	<b>Zip:</b> 82331
E-mail address (Required for Remittance Advice): crimminsassociates@gmail.com Stacy Crimmins	Payment Method: check		IRS Taxpayer ID (FEIN): 83-6000089	
Accounting Contact Name: Marie Christen	Telephone Number: (307) 326-8335		Fax Number:	
Banking Information	1		1	
Bank Name:	Bank Routing Number:		Bank Account Number:	
Address:	City:		State:	Zip:

Name (signature)

March 7, 2023

Date

**Chuck Davis** 

Name (print)

## Mayor of Town of Saratoga

Title (print)

For HollyFrontier or HEP Internal Use					
Date:	Contact Name:	Title:	Telephone or Email Address:		
Contact Attempts:	Vendor Detail Changed:				

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