



AUTHORIZED VENDOR APPLICATION

Vendor Name

Date

WestPro Management and Leasing, LLC | 1489 W. Warm Springs Road, Suite 110 | Henderson, NV 89014
702.966.8295 Phone | 702.543.3240 Fax | www.westprolv.com

Mailing Address: 631 N. Stephanie Street – #190, Henderson, NV 89014



AUTHORIZED VENDOR APPLICATION Introduction

Welcome to WestPro Management and Leasing, LLC (hereinafter referred to as the "WestPro"). We are pleased that you are interested in joining our authorized vendor list. We specialize in management and leasing of residential properties, including single-family homes, condominiums, and townhomes. All properties under our management are located in Las Vegas, North Las Vegas, and Henderson. We are constantly looking to develop alliances with professional vendors whose services will benefit our clients while providing vendors with additional exposure to new business.

1. ABOUT US

1.1 Affiliations

We are members of the National Association of Realtors®, Nevada Association of Realtors®, and the Greater Las Vegas Association of Realtors®. Additionally, we are a member of the Institute of Real Estate Management and National Association of Residential Property Managers. Our staff holds professional designations in the field of property management.

1.2 Application Process

All vendors must complete the Authorized Vendor Application in its entirety. Any missing or incomplete information may delay the processing of the application, or may cause it to be rejected. The application process will take, on average, 24 to 48 hours, after which time, if approved, the vendor will be added to our Authorized Vendor List.

2. VENDOR REQUIREMENTS

In addition to completing the Authorized Vendor Application all vendors will be required to provide the following:

2.1 Business Information

Name of the business, type of ownership, years in business, area of expertise/services provided, applicable license(s), and insurance information.

2.2 Licenses

All vendors must have the Nevada Business License and/or State of Nevada Contractor's License. A copy of a license must be submitted with this Application, clearly showing the business name, license number, and the expiration date.

2.3 Insurance

All vendors must be covered by commercial liability insurance. Depending on the risk factors, the coverage should be for a minimum of one million (\$1,000,000) dollars aggregate. In addition, all vendors must carry Workers' Compensation Insurance. A Certificate of Insurance for both policies must be issued to WestPro, naming WestPro Management and Leasing, LLC, 631 N. Stephanie Street - #190, Henderson, NV 89014, as Certificate Holder.



2.4 IRS W-9 Form

Only vendors who are NOT incorporated must complete a W-9 Form. Vendors operating as a Corporation or a Limited Liability Corporation are not required to do so.

We appreciate your interest in becoming our Authorized Vendor.

WestPro Management and Leasing, LLC

AUTHORIZED VENDOR APPLICATION

Vendor Information				
<i>Business/Company Name</i>				
<i>Type of Business/Services Provided</i>				
<i>Phone</i>	<i>Fax</i>		<i>Email</i>	
<i>Website</i>	<i>After Hours/Emergency Phone</i>		<i>License Number(s)</i>	
<i>Type of Ownership (Inc/LLC/Sole Proprietor)</i>		<i>Federal EIN #</i>	<i>Principal's SS# (if NOT incorporated)</i>	
<i>Years in Business</i>			<i>Days and Hours of Operation</i>	
<i>How to Submit Work Orders to You?</i>	<input type="checkbox"/> <i>Fax</i>	<input type="checkbox"/> <i>Email</i>	<input type="checkbox"/> <i>Fax or Email</i>	<input type="checkbox"/> <i>Must Call It In</i>

Owner/Principal Information		
<i>Name</i>		
<i>Phone</i>	<i>Fax</i>	<i>Cell Phone</i>
<i>Email</i>		

Business Address		
<i>Street Name (include suite number, if any)</i>		
<i>City</i>	<i>State</i>	<i>Zip Code</i>

Business Mailing Address (complete only different from business address)		
<i>Street Name (include suite number, if any)</i>		
<i>City</i>	<i>State</i>	<i>Zip Code</i>



DISCLOSURE
Please read carefully before signing

- A. Vendor declares that the information contained herein is true and correct, and authorizes WestPro to verify vendor's credentials/licensing, and insurance information with applicable State and Local authorities.
- B. Vendor agrees to provide its services, upon request from WestPro, and for the sole benefit of WestPro clients, and at no time said services shall constitute any form of employment between WestPro and the Vendor, its principals, officers, directors, and employees.
- C. Vendor does hereby release WestPro and its clients from any and all damages or liabilities which might result from Vendor's services and operations.
- D. Vendor agrees to honor all requests to provide bids in a timely and professional manner.
- E. Vendor understands and agrees that vendor's invoices shall be paid by WestPro within thirty (30) days of receipt.

Owner/Principal Name (print) _____ **Date** _____

Signature of Owner/Principal _____ **Date** _____

For Office Use ONLY

Application approved on _____

Application declined on _____

If declined, state reason... _____

By: _____ Title _____