



New Carrier Requirements

Accelerated Logistics LLC * 19201 E. Lincoln Avenue Parker, CO 80138 * 720.200.3100 * Fax 720.200.3101 * www.autotrans.com

Thank you for your interest in hauling for Accelerated Logistics. Please complete the new carrier packet and return it with all required documents, by email or fax to 720-200-3101.

We will not accept:

Any policies with On-hook or On-Hook Cargo insurance **OR** Policies written with: Lloyds of London or any of their subsidiaries/ Stonegate Insurance/ Unique Insurance

We must be listed as a **Certificate Holder and Additionally Insured** on both the Liability and Cargo Insurance Coverage. You must meet the following requirements for us to review for approval:

Minimum Insurance Requirements:

Auto Liability coverage: \$1,000,000

Cargo Coverage: (Please make sure to identify the number of cars you can transport on the carrier packet)

1-4 Car Trailers \$150,000.00

6-7 car Haulers \$250,000.00

8 or more car Haulers \$350,000.00

Deductible cannot exceed \$2,500

We require that you carry Diminished Value, or Loss of Value Coverage to haul OEM vehicles. You will need to contact your Agent to have it added as an endorsement to your policy if you do not currently have it. The coverage must be listed on your insurance certificate.

We require you have **two years'** experience under your company name and most current MC number before we can review you for approval.

You must also provide an Experience letter/Loss Run letter from your Insurance Company. This will list out the number of claims or gaps in coverage if you have any.

Please keep in mind it can take up to 24 hours to be approved. No Incomplete Packets will be reviewed. We will dispose of incomplete packets after one business day. We will send you an email noting approval or non-approval. If you are emailing your completed packet back it must be in ONE attachment to the email. We will not attempt to work with embedded or multiple attachments/documents. Please make sure all changes are completed prior to submitting the completed carrier packet.

Please provide the following with the completed carrier packet:

Please fill out each page of the packet and initial the bottom of each page showing that you have read it.

- ☐ Please fill out The Contact Information Page **completely and legibly**.
- ☐ Make sure you have 2 years under your current company name and MC number to apply
- ☐ Complete the W9 form
- ☐ Include a copy of your MC Certificate, and fill in your DOT number on page 3
- ☐ Include three professional references on your letterhead with phone numbers
- ☐ Provide Proof of Workers Compensation Coverage
 - If you are exempt from Carrying Workers Compensation insurance, you must sign the enclosed Release from Liability Waiver on page 9
- ☐ Current Insurance Certificate
 - Carrier must provide a certificate with Accelerated Logistics named as Certificate Holder and Additionally Insured for both Cargo and Liability Coverage.
 - Have your agent send you your Experience Letter or Loss Run letter to be sent with the packet.
- ☐ You must fill out the Load Request Form if you are wanting a load.
- ☐ Please provide a copy of your Bill of Lading.
- ☐ Fax or email your completed packet with the requested documents to 720-200-3101 or claims@autotrans.com

Incomplete packets will not be reviewed for approval.



**PLEASE NOTE: WE DO NOT HOLD OR
GUARANTEE LOADS**

**YOU MUST BE AN APPROVED CARRIER FOR US TO
DISPATCH. LOADS ARE ASSIGNED ON A FIRST
COME, FIRST SERVE BASIS. WE REQUIRE THAT A
NEW LOAD REQUEST FORM BE FILLED OUT FOR
EACH NEW LOAD. GO TO LOADREQUEST.COM
TO FILL OUT THE LOAD REQUEST. Carriers and
their Drivers must download and use the
V-TAS application on their mobile device
to receive a load or be paid for a load.**



Contact Information Sheet

~~Accelerated Services LLC Accelerated Logistics LLC * 19201 E. Lincoln Avenue Parker, CO 80438 * 720.200.3400 * Fax 720.200.3404 *~~

Please Print Legibly Company Name:	
Mailing Address:	
Billing Address:	
Owners Name:	
Owners Phone#:	
MC #:	
DOT #:	
Dispatch Phone #:	
Contact Email#:	
Fax #:	
Office Phone #:	

Select your biggest Hauler:

☐ 1-4 Car Hauler

☐ 5-7 Car Hauler

☐ 8 + Car Hauler

Drivers Names and Numbers	
Name	Number

If you have more than 4 drivers/trucks you will need to send the list of drivers/trucks with your application



Sub-Contractor Agreement

Accelerated Logistics LLC * 19201 E. Lincoln Avenue Parker, CO 80138 * 720.200.3100 * Fax 720.200.3101 *

This agreement is entered this _____ Date between Accelerated Logistics, hereinafter referred to as the CONTRACTOR and _____ Hereinafter referred to as CARRIER (AKA Sub Contractor).

THE TERMS AND CONDITIONS SHALL BE AS FOLLOWS:

WHEREAS, Contractor is a regulated transportation broker pursuant to authority issued by the Federal Highway Administration; and

WHEREAS, Contractor and carrier are desirous of providing for the transportation by Carrier of Freight primarily consisting of automobiles and light trucks originated and designated by Contractor;

NOW, THEREFORE, in view of the above and foregoing, the mutual covenants and the conditions set forth herein, and other good and valuable consideration, the receipts and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

ALL LOADS REQUIRE THE FOLLOWING ITEMS TO BE COMPLETED PRIOR TO CARRIER RECEIVING PAYMENT:

- 1) All drivers are required to count and verify all VIN Numbers for the shipment before loading, Carrier accepts full responsibility for all costs associated with any vehicle that is transported in error due to Carrier's negligence of not confirming vehicle identification number (VIN) and/or confirming that the Maroney sticker matches the destination. Before loading, the driver must notify Contractor, if any discrepancies are found. Contractor will not be responsible for any shortages, loss or damage to the shipments transported by Carrier, and Carrier's liability for cargo damage will be that of a common Carrier with no limits of liability applying. At delivery, Carrier agrees to have its drivers obtain a signed bill of lading or delivery receipt via the V-TAS application from the consignee, including the typed name of the person signing. Failure to do so may result in an additional twenty percent (20%) retention of the contracted load rate.
- 2) Carrier shall look only to Contractor and not to the involved shipper, consignee or customer of Contractor for payment of Carrier's freight charges under this agreement. Contractor shall be entitled to deduct any loss, shortage or damage claim from any money including freight charges that may be owed to Carrier.
- 3) Carrier agrees to load and deliver all freight on or before the dates provided to the Contractor on Contractors load request form; Carrier further agrees to accept financial responsibility for any cost(s) incurred due to late delivery, to include but not limited to, rental car reimbursement. Penalties for delivery later than 24 hours will equal 10% per day and/or any discounts that the Contractor gives to the customer due to delays. Vehicles with damage will be negotiated at the Contractors discretion, and any amounts adjusted due to damage will be adjusted to the carrier pay as well.

- 4) Carrier agrees to provide its driver's name and a working cell phone number, and that the driver will communicate with /contractor on a daily basis from the time the freight is loaded until it is delivered. Failure to comply will result in a ten percent (10%) rate reduction.
- 5) Contractor requires that Carrier or its driver's contact Consignee 24 hours before delivery to arrange inspection and delivery during normal receiving hours. Carrier or its drivers shall report all delays on deliveries immediately to Contractor or pay and additional ten percent (10%) penalty.
- 6) By signing below, Carrier warrants that it is duly and legally qualified to provide the transportation services contemplated herein, and that it holds liability insurance for at least one million dollars (1,000,000.00). The Carrier further warrants that it has cargo damage insurance of the following requirements or more as necessary to adequately insure the cargo: 1, 2, 3, or 4 car carriers, \$150,000.00; 6 or 7 car carriers, \$250,000.00; 8 or more car carriers, \$350,000.00. As Carrier is responsible for damage to vehicle while in its care, custody or control, Motor Truck Cargo Coverage with sufficient limits per tractor/trailer unit must be maintained at all times. The deductible per loss should be no greater than two thousand five hundred dollars (\$2500.00). Even though Motor Truck Cargo insurance is required Carrier is responsible for any and all damages to the freight. Carrier hereby acknowledges and agrees that in the event that high-value vehicle is being transported, the Contractor reserves the right to adjust these limits.
- 7) **RISK OF LOSS:** Carrier shall have the sole and exclusive care, custody and control of the freight from the time the freight is delivered to Carrier for transportation until delivered to the consignee accomplished by the use of the V-TAS application. Carrier assumes the liability of a common carrier for custody and Carrier shall bear all risk of loss with respect to the freight being transported by Carrier pursuant to this agreement. Carrier shall indicate on the V-TAS application any damages to freight transported by Carrier. Contractor will handle the claims with shippers and carrier shall pay all claims and costs thereof within ten (10) days after notification of the amount of such claim by Contractor. Contractor will advise Carrier of shipper's loading requirements and cargo claim payment procedures and Carrier agrees to comply with those requirements and to honor claims filed with Contractor in accordance with this procedure. In case of severe damage to a vehicle bearing a brand or trademark, which in any way carries or implies that guarantee of the manufacturer, the manufacturer, exercising reasonable discretion shall be the sole judge as to whether the vehicle is to be declared a "Total Loss", such damaged vehicle shall not be sold or otherwise disposed of except by the manufacturer or with its consent. The manufacturer in some cases may also invoke a "loss of sale" penalty on "Total Loss" claims in addition to the cost of the vehicle. Carrier acknowledges and agrees that it shall be responsible for payment in full of all costs, expenses and penalties associated with a "Total Loss". Carrier will be responsible for loss of value on all vehicles. Loss of value on a manufacturer vehicle are determined by the manufacturer and are non-negotiable.

Carrier agrees to pay a \$35.00 fee for each claim opened. Claims over \$2500.00 or requiring extensive time will then be billed at a rate of \$50.00 per hour for claims management. The fee will be charged on the quarter hour (15 minutes) for time spent working the claim until the claim is settled with full payment.

- 8) Carrier agrees to indemnify Contractor and hold Contractor harmless as follows: a) for loss of, or damage to Carrier's equipment; b) for loss resulting in injury, including death sustained by Carrier or by any employees of carrier or by any other person while acting in the capacity of the driver or helper in connection with the operation of the equipment utilized herein including the payment by /Carrier of any workmen's benefits, unemployment compensation benefits, as well as any additional benefits paid under "No Fault" and "Personal Injury Protection" laws by any state; c) for bodily injury, property damage, or cargo loss or damage including the defense of lawsuits therefrom arising out of the maintenance use, or operation of the equipment utilized herein, and ; d) for any loss or damage sustained by Contractor as a result of negligence, incompetence, or dishonesty of Carrier or Carrier's agents or employees. Carrier shall pay costs, expenses and attorney's fees that may be expended or incurred by Contractor in remedy for Contractor against the Carrier or in litigation brought against the Contractor because of any omission of Carrier under this agreement.
- 9) The relationship of Carrier and Contractor shall at all times be that of an independent contractor and that the parties agree that the driver and helpers furnished by carrier for performing the services under the terms and condition of this agreement are the employees or independent contractors of carrier and are not the employees of Contractor. The parties further agree that the Carrier is not an employee of Contractor but is an independent Contractor.

10) CARRIER MUST DELIVER using the V-TAS application.

- 11) If any damage is noted on a vehicle, it must be noted and signed for via the V-TAS application (as applicable before moving the vehicle from its location or the vehicle being removed from the auction, in this instance, note damage on the reverse side of the gate pass also).
- 12) Any damage noted by carrier needs to be reported to Contractor as soon as feasibly possible. Further, Carrier must advise Contractor if damage is transport related or was noted at time of pre-loading inspection. Delivery of all vehicles must be during normal operating hours unless otherwise authorized by Contractor. Carrier accepts any damage not signed for or noted sufficiently at the time of pickup. If Contractor authorizes any after-hours delivery, vehicles will be delivered "Subject to Inspection" and the V-TAS application entry should be signed "STI" in the signature portal. Carrier accepts responsibility for any damages not properly documented at the time of pickup. Carrier agrees to take photos of the damage to supply to the Contractor within 24 hours of the damage.
- 13) In the event of a "Collect on Delivery" (COD) load, checks are to be payable to "Accelerated Services", unless previously arranged by Contractor. If load is a "COD", Carrier will receive payment upon the receipt of required paperwork (exception transport damage which will be made upon settlement of damage claim).

- 14) CARRIER'S equipment only is to transport the freight contained herein. Carrier is not to broker this freight. Brokering will result in retention of contracted rate or percentage thereof at the sole discretion of Contractor.
- 15) Non-Competition. During the term of this agreement and for a period of 18 months or after, carrier shall not compete, solicit or submit any bid on any traffic or to any customer, shipper or consignee assigned by Contractor to Carrier. Any and all freight or traffic offered to Contractor is considered as being offered to Contractor, not Carrier. Carrier agrees to pay all monies for freight taken by Contractor under this agreement without exception. Any breach would be cause for Contractor to take appropriate legal action to remedy the situation and recover both present and future damages. Both Carrier and Contractor agree that a Restraining Order would be the first remedy.
- 16) VENU. This agreement supersedes all other documents, to include carrier's Bill of lading. It is the intention of the parties hereto that this agreement and performance hereunder and all suits and special proceedings here under shall be construed in accordance with and under pursuant to the laws of the state of Colorado (unless prompted by applicable federal law), and that any action, special proceeding, or other proceeding that may be brought arising out of, in connection with or by reason of this agreement, the laws of the State of Colorado shall be applicable (unless preempted by applicable federal law) and shall govern the exclusion of the laws of any other forum without regard to the jurisdiction in which any in the district court for the county of Douglas, State of Colorado, and any other venue is hereby waived.
- 17) TERM the term of this agreement shall be for one (1) year and shall automatically renew for successive one (1) year periods; provided, however, that this agreement may be terminated at any time by giving 30 days prior written notice. Notice will be mailed certified return receipt requested by US Mail only. Contractor will not pay invoices received from Carrier without the above –mentioned items. It is the Carrier's responsibility to provide this information in a timely fashion. Carrier will not be paid until Contractor is paid without exception. Attention to all of the above will expedite this process.

Please sign and return to Accelerated Logistics LLC via email (claims@autotrans.com) or fax (720)-200-3101.

☐ By checking this box, you are agreeing to the Terms and Conditions outlined in this Agreement.

TODAYS DATE:	
CARRIER NAME:	
AUTHORIZED SIGNATURE:	

LEGAL DIGITAL SIGNATURE- Typing your name in the space provided is the same as signing this document. By signing you are certifying you are an authorized legal representative for the Carrier.



Terms of Payment Form

Accelerated Logistics LLC * 19201 E. Lincoln Avenue Parker, CO 80138 * 720.200.3100 * Fax 720.200.3101 *

Per our sub-contractor agreement, Carriers are not paid until we are able to invoice (which in most cases is 30 days from when we receive your proof of delivery and invoice). However, we do have a quick pay option which means that your check will go out within five business days of the receipt of your proof of delivery and invoice at a 5% discount. Please select the terms from the options below that will suit your situation best, sign the form and fax it back to us.

All payments are made by check. WE DO NOT DO COMCHECKS. Five-day invoices are processed within five business days and mailed via standard mail, and requests for express delivery are accepted with the understanding that the amount of express postage will be deducted from the final payment.

WE MUST RECEIVE A SEPARATE TERMS OF PAYMENT FORM WITH EACH LOAD YOU HAUL IN ADDITION TO YOUR INVOICE.

All five-day quick pays are paid only if the delivery was made in a reasonable time frame and the vehicle is free of any transport damage and all terms and conditions were met.

PLEASE CHECK WITH PAYMENT OPTION YOU WOULD PREFER:

☐

I choose to receive payment via standard terms (about 30 days from the time I submit my completed delivery paperwork and invoice) via standard mail.

☐

I choose for my payment to be sent out within five business days from the time I submit my completed delivery paperwork and invoice for a five percent discount off the price of the submitted invoice via STANDARD MAIL

☐

I choose for my payment to be sent out within five business days from the time I submit my completed delivery paperwork and invoice for a five percent discount off the price of the submitted invoice via FEDERAL EXPRESS STANDARD NEXT DAY. There will be an extra charge of \$20.00 for this option.

TODAYS DATE:

CARRIER NAME:

ACCELERATED LOGISTICS ORDER #

PRINT NAME

AUTHORIZED SIGNATURE:

LEGAL DIGITAL SIGNATURE-Typing your name in the space provided is the same as signing this document. By signing you are certifying that you are an authorized legal representative of the carrier.



Release of Liability Waiver

Accelerated Logistics LLC * 19201 E. Lincoln Avenue Parker, CO 80138 * 720.200.3100 * Fax 720.200.3101 *

WORKERS COMPENSATION

IF PROOF OF WORKER'S COMPENSATION HAS NOT BEEN PROVIDED TO ACCELERATED LOGISTICS THE FOLLOWING FORM IS REQUIRED!

I certify UNDER PENALTY OF PERJURY that: (Name of Sub-Contractor or trade name of business)

Who is a Carrier of Freight performing transportation services primarily consisting of automobiles and light trucks originated and designated by Accelerated Logistics, that I am exempt from carrying worker's compensation coverage for the following reasons:

- ☐ I am an Independent Contractor as defined by the State of Colorado and pursuant to the requirements outlined in the Colorado Workers Compensation Act. I certify under penalty of law that I meet ALL of the following requirements:
- ☐ I am free from the control and direction in the performance of services from Accelerated Logistics (meaning I am NOT REQUIRED to work for Accelerated Logistics ONLY)
- ☐ I am customarily engaging in an independent trade, occupation, profession, or business related to the services performed.
- ☐ I do not have ANY employees (full or part time) as defined by the Worker's Compensation Act.

PLEASE REFER TO THE FOLLOWING WEB SITE FOR A COMPLETE COPY OF THE COLORADO WORKER'S COMPENSATION ACT OR IF YOU NEED FURTHER ASSISTANCE.

<https://www.colorado.gov/pacific/cdle/node/20506>

AUTHORIZED
SIGNATURE

TODAYS
DATE:

LEGAL DIGITAL SIGNATURE-Typing your name in the space provided is the same as signing this document. By signing you are certifying you are an authorized legal representative for the Carrier.



Load Request Form

Accelerated Logistics LLC * 19201 E. Lincoln Avenue Parker, CO 80138 * 720.200.3100 *
720.200.3101 www.autotrans.com

- ☐ Driver must utilize the V-TAS application from their electronic device. Dispatch can assist with set up if you have any questions on how to use. All Consignee signatures must be accompanied by the typed name of the person signing on the application.
- ☐ Accelerated Logistics, LLC must be contacted immediately by a representative of your company if a vehicle will not load or drop on the dates specified below. Failure to notify Accelerated Logistics, LLC of a cancelled order will result in a 10% charge.
- ☐ Driver MUST contact both PICK UP AND DELIVERY parties to update them with accurate information and ETA
- ☐ PRICE INFORMATION MUST NOT BE SHARED WITH CUSTOMERS
- ☐ Driver must verify all vehicle information. If there are any discrepancies, please call our office immediately! Do not pick-up unauthorized vehicles!
- ☐ DO NOT RE-ASSIGN OR BROKER OUR FREIGHT
- ☐ A 20% penalty may be charged to your company if these conditions are not met for each and every vehicle.

ORDER #		ORIGIN	
CARRIER NAME		DESTINATION	
DISPATCH CONTACT		DRIVER FULL NAME	
DISPATCH PHONE#		DRIVER PHONE#	
DISPATCH EMAIL		DRIVER EMAIL	

PICK UP DATE: _____ DELIVERY DATE: _____

- ☐ By checking this box, you are agreeing to the Terms and Conditions outlined above as well as you agree to the Terms and Conditions in Accelerated Logistics, LLC "Sub-Contractor" Agreement.

Authorized
Signature

Today's Date

LEGAL DIGITAL SIGNATURE-Typing your name in the space provided is the same as signing this document. By signing you are certifying you are an authorized legal representative for the Carrier.

SUBHAULER AGREEMENT

ADDENDUM 1

In respects to Motor Truck Cargo Insurance, Subcontractor agrees to the following terms and conditions related to the transport and/or storage of new motor vehicles. A new motor vehicle being defined as never having the title or registration transferred from a manufacturer, distributor, or dealer to an ultimate customer.

The extent and classification of any damage occurring to a new motor vehicle while the motor vehicle is in Subcontractors custody shall be made by the shipper, and the shipper shall be the sole judge as to the damage category, including but not limited to Constructive Total Loss, or Diminished Value.

Subcontractor agrees that they are financially responsible for any loss involving Constructive Total Loss or Diminished value whether their insurance carrier provides coverage for these exposures or not and agrees to reimburse Carrier for full valuation of a new motor vehicle as described above.

By signing below the Subcontractor agrees to this Addendum. The person signing this Addendum on behalf of the Subcontractor also agrees that they are either an owner, officer or have been authorized to enter into agreements on behalf of the subcontractor.

Broker:

SUBCONTRACTOR:

Accelerated Logistics, LLC

Company Name: _____

Authorized By: _____

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.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.) City, state, and ZIP code List account number(s) here (optional)	Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line 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.

Social security number								
				-			-	

Employer identification number								
				-				

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below).

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**

Signature of
U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

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.

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:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- 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.

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.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

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.