



Northville Downs

John Carlo
Director of Operations

Mike Carlo
Operations Manager

ATTN: Horsemen

Purse check will be available for pick up between the following hours:

10a.m. - 5p.m. Tuesday - Thursday
10a.m. - 8p.m. Friday and Saturday

All purse check will be available for pickup on the following Tuesday.

Drivers checks will be available the 15th, and the last day of every month, or following Tuesday.

Trainer's checks will be available on the 15th, or following Tuesday of every month.

Checks will be mailed on the 15th and last day of the month, or following Tuesday.

301 SOUTH CENTER STREET
NORTHVILLE, MICHIGAN 48167 • PHONE 248-349-1000

WHERE PARI-MUTUEL HARNESS RACING BEGAN IN MICHIGAN



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ATTN: Horsemen

When filling out your yearly W9 please make sure:

- It is fully filled out and legible.
- Let us know if you are an owner, trainer, driver or any combination of the three.
- We need to have a separate W9 filled out for each Partnership, each Owner, Trainer and Driver.
- **If you are using a business name and do NOT have an EIN number, PLEASE write your name and then your DBA name in the “Name” spot.**

Thank you

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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, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I 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.

Social security number
or
Employer identification number

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

Under penalties of perjury, I certify that:

1. 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
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. 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 ▶
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Check all that apply:

Owner

Trainer

Driver

Additional Owners: _____

Mail My Purse Check to me at the above address

I Authorize Northville Downs to release my purse checks to the following person(s):

Signature: _____ Phone: _____ Date: _____