



GOAL PROPERTIES
FINDING THE RIGHT HOUSE FOR YOUR HOME

NEW VENDOR PACKET

Onboarding Process and Documents

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INTRODUCTION

Thank you for your interest in becoming a vendor for GOAL Properties.

We are a national single family residential property management company in need of home repair vendors; General Contractors, Handymen, Plumbers, Electricians, Flooring Installers, Painters, Roofers, Cleaners, Structural Engineers, etc.

GOAL currently manages properties in the Atlanta, Baltimore, Charlotte, Dallas, Houston, Indianapolis, Jacksonville, Minneapolis, and Tampa/Orlando markets:

All work will be completed on one of our single-family homes in those markets.

Vendors must be reliable and capable of completing all projects accepted in a timely manner. Scopes of work will vary from basic repairs to whole house remodels. Typical tasks for contractors would include door and/or window replacement, drywall repair, painting, carpet cleaning or replacement, roofing, framing, trim and cabinet repairs, plumbing and electrical updates, demolition and remediation.

QUALIFICATIONS

All Vendors must be prepared to provide the below required licenses and insurance to work with GOAL.

Insurance

All GOAL Vendors are required to carry the below insurance policies per section 13 of the GOAL Master Agreement:

- 1) Worker's Compensation Insurance Statutory
Employer's Liability Insurance:
 - a) Bodily Injury by Accident \$1,000,000.00 each accident
 - b) Bodily Injury by Disease \$500,000.00 each employee
 - c) Bodily Injury by Disease \$500,000.00 policy limit

- 2) Comprehensive General Liability
 - a) General Aggregate \$2,000,000.00
 - b) Products/Comp/Op. Aggregate \$1,000,000.00
 - c) Personal & Advertising Injury \$1,000,000.00
 - d) Each Occurrence \$1,000,000.00
 - e) Fire Damage \$50,000.00
 - f) Medical Exp. (any one person) \$50,000.00

- 3) Comprehensive Automobile Liability
 - a) Bodily Injury & Property Damage \$300,000.00 combined single limit

A WORKER'S COMP EXEMPT CERTIFICATE MAY BE PRESENTED IN LIEU OF WORKER'S COMP INSURANCE IN SOME STATES. THE EXEMPTION CERTIFICATE CAN BE OBTAINED FROM THE STATE DIVISION OF WORKER'S COMP.

SEE "EXHIBIT D" (PAGE16) FOR THE NAMES OF ADDITIONAL INSURED AND "COI EXAMPLE" (PAGE16). SEND THOSE TWO DOCUMENTS TO YOUR INSURANCE COMPANY TO AID IN PRODUCING THE CORRECT COI NEEDED.

Licenses

TRADE LICENSES ARE REQUIRED FOR CERTAIN VENDORS SUCH AS PLUMBERS, HVAC, ETC. IF YOUR TRADE REQUIRES A LICENSE, PLEASE PROVIDE IT AT THE TIME OF SUBMISSION.

Lead Renovator Certificate

All GCs, Handymen, and Painters are required to provide a Lead Renovator's Certificate.

As of April 22, 2010, anyone who performs renovations, repairs, or painting in pre-1978 housing or child-occupied facilities must be Lead-Safe Certified by the EPA or an EPA-Authorized state. Individuals and firms that are not certified could face fines of up to \$37,500 per day.

This Lead Renovator (RRP) Initial Certification course is 8 hours in length and includes lead safety training approved by the EPA or applicable EPA-Authorized state program. Any contractor performing qualifying work on pre-1978 homes or child-occupied facilities must employ at least one Certified Renovator who has successfully

completed this training. Companies must also process an application to become a Lead Safe Certified Firm. The course concludes with a certification exam.

There are a number of companies that provide this training.

Zack Academy is a National company with many locations available: https://www.zackacademy.com/class/epa-lead-certification/epa-lead-renovators-certification-initial?select_state_et=

Financial Responsibility

The payment terms for all GOAL work:

Invoices will be paid NET 30 days from the date of submission. However, the Contractor should begin work immediately upon acceptance of the Work Order/Contract.

PROJECT PRICING

GOAL's overall budget pricing for maintenance is STANDARDIZED: Pre-established uniform price for a good or service, based on its historical price, replacement cost, or an analysis of its competitive position in the market.

If a maintenance item is non-standard, you will be asked to provide a bid.

The scope and budget for turns is created utilizing the labor and material amounts embedded in Home Depot's RenoWalk app. The RenoWalk app is utilized for all turn projects.

We have partnered with several direct vendors you will utilize for GOAL jobs who will help tremendously in keeping your costs down by providing low standardized pricing and additional discounted products and services to GOAL Vendors.

We work very hard to provide fair pricing to our contractors. There may be some items with smaller margins and other items with larger margins.

If you come across a line item that you simply cannot make work at the price provided, please contact the GOAL maintenance department immediately. We will make every effort to work with you.

VENDOR DOCUMENT CHECKLISTS

Below is a checklist of documents for each Vendor Type and their requirements:

Handyman or GC

- Master Agreement
- Vendor Information Sheet
- W-9 and Bank Account Routing Number and Checking Account for ACH Payments
- Lead Renovator Certificate
- General Liability Insurance
- Automobile Insurance
- Workers Comp Insurance

Painter

- Master Agreement
- Vendor Information Sheet
- W-9 and Bank Account Routing Number and Checking Account for ACH Payments
- Lead Renovator Certificate
- General Liability Insurance
- Automobile Insurance
- Workers Comp Insurance

Electrician, HVAC, Plumber, Pest Inspector & Control, Home Inspector, Engineer

- Master Agreement
- Vendor Information Sheet
- W-9 and Bank Account Routing Number and Checking Account for ACH Payments
- Trade License
- General Liability Insurance
- Automobile Insurance
- Workers Comp Insurance
- Submit price list for additional services provided

Cleaning, Carpet Cleaning, Flooring Install, Well Driller, Septic Service, Garage Door Install, Roofing, etc.

- Master Agreement
- Vendor Information Sheet
- W-9 and Bank Account Routing Number and Checking Account for ACH Payments
- General Liability Insurance
- Automobile Insurance
- Workers Comp Insurance
- Submit price list for additional services provided

If your Vendor Type is not listed, please contact Marden Gonzalez Irias mgonzalez@goalproperties.com

DOCUMENT SUBMITTAL PROCESS

The required vendor documents are contained in the following pages.

PLEASE RETURN ALL DOCUMENTS IN ONE EMAIL.

DO NOT SEND PARTIAL EMAILS IF YOU DO NOT CURRENTLY HAVE ALL REQUIRED DOCUMENTS.

Document Naming

PLEASE SEPARATE THE DOCUMENTS AND NAME THEM PROPERLY AS SHOWN IN THE EXAMPLES BELOW:

~ABC CLEANING W9~

~ABC CLEANING VENDOR INFORMATION SHEET~

~ABC CLEANING MASTER AGREEMENT~

~ABC CLEANING COI~

~ABC CLEANING License and/or Certificate~ (*If applicable*) ~

If certain documents do not pertain to you, please advise in your email.

Once we've received the above items, someone from the GOAL maintenance team will follow-up with a New Vendor Orientation and go over how our projects work, expectations, anything you don't feel comfortable doing, etc.

Getting the completed paperwork turned in is the first step.

Once all documents are received, New Vendor set-up takes approximately 10 business days.

In the meantime, please feel free to review the information regarding the GOAL process and pricing contained in the GOAL MASTER AGREEMENT section.

Please return all documents via email to:

Marden Gonzalez Irias

mgonzalez@goalproperties.com

252-316-2365 ext. 157

VENDOR INFORMATION SHEET

Company Name: _____

Company Address: _____

Company Category (Must possess applicable licenses and insurance): Please circle all that apply.

General Contractor Handyman Cleaning/Carpet Cleaner/Steamer Plumber Painter
Electrician Engineer Environmental Photography Garage Door Roofing Home Inspection
Pest Inspection Pest Control Countertop Installation --- Granite or Laminate (circle one or both) HVAC/Boiler
Other specialty service(s) not listed _____

GOAL Markets your company operates in (Must have employee project management staff in market):

Please Circle all that apply.

Atlanta, GA Baltimore, MD Charlotte, NC Columbus, OH Columbia, SC Dallas, TX Houston, TX
Indianapolis, IN Jacksonville, FL Tampa, FL Minneapolis, MN Oklahoma, OK Las Vegas, NV

Owner (s) of Company: _____

Primary point of contact for your company. (This is the person/address ALL emails will be sent to via GBC's automated system. If you would like emails to go to more than 1 person, please set up a rule in your own email system to auto-forward to the rest of your team):

Name: _____

Position at Company: _____

Email Address: _____

Phone: _____

Secondary Contact – (Accounting specific, Market specific project manager, etc.)

Name: _____

Position at Company: _____

Email Address: _____

Phone: _____

What communication would go to this person directly? _____

*If you have any other contacts that you wish to be added to this account, please advise on an additional page

Information for ACH Payments (All Payments will be directly deposited into your account):

Update your ACH for direct deposit: <https://docs.google.com/forms/d/1-wiw4jFSwcjq7sK-LHNnJOfJUBGXbhjRwVwTMWBUB2Y/edit?usp=sharing>

GOAL MASTER AGREEMENT

_____ ("Vendor"), located at _____,
_____, _____ hereby contracts with GOAL Property Services, LLC as Managing Agent ("Agent") on behalf of Owner of the property where services are to be performed, located at 6836 Morrison Blvd, Suite 420, Charlotte, NC 28211, to provide certain Vendor services (as specified below) to one or more single family houses (Properties) owned by Agents.

1. JOB DESCRIPTION

This Master Agreement will govern work the Vendor will perform for Agents under separate work orders, in the "Scope of Work". Each Scope of Work will describe the work to be performed and the compensation and schedule for that work. Each Scope of Work will be appended and incorporated fully herein to this Agreement on an ongoing basis as agreed between the Parties during the term hereof. If the work is modified by written field authorization or Change Order, the work, services and/or materials performed/provided will also be subject to Exhibit B which is incorporated herein.

2. TIME OF PERFORMANCE

Vendor will begin work immediately upon acceptance of each new Scope of Work. Vendor will provide the crews necessary to ensure that the project is completed within the calendar days set forth in the Scope of Work.

3. LATE PERFORMANCE

It is agreed that Vendor will complete jobs within the agreed upon time schedule. Vendor will be charged a penalty of seventy-five dollars (\$75.00) per day for each and every day that scheduled work is over and beyond agreed upon time schedule plus any consequential damages incurred by Agent and/or Owner. Such penalty shall, at Agent's sole discretion, be either deducted from scheduled payments or provided by Cashier's Check to Agent upon demand.

4. INDEPENDENT VENDOR STATUS

It is agreed that Vendor shall perform the specified work as an independent Vendor. Vendor attests that it will maintain its own independent business, use its own tools, and be solely responsible for and have control over construction and coordinating of all portions of the work under the contract, independent of Agent's supervision. The Vendor shall be responsible for acts and omissions of the Vendor's employees, subcontractors and their employees, and other persons or entities performing work on behalf of the Vendor.

5. CODES, PERMITS AND APPROVALS

Vendor is responsible for ensuring that all work meets or exceeds state, city, municipality, and/or county Codes and/or Ordinances. Vendor is also responsible for obtaining all necessary work and/or building permits and providing Agent with such permits prior to start of work and copies of closed out permits upon completion of scope of work.

6. MATERIALS

All materials will be new and in compliance with all applicable laws and codes. Agent may choose to purchase material direct from wholesaler, however, Vendor will be responsible for order, pickup, delivery and installation of material. Upon receipt of material it is the Vendors responsibility to safely store material in a manner where it won't be damaged or stolen. Material that is damaged or stolen will be the Vendors responsibility to replace at

their cost. Vendor is responsible to pay all sales, consumer, use and other similar taxes for all materials purchased or equipment utilized in the construction process.

7. CHANGE ORDERS (MID-PERFORMANCE AMENDMENTS)

Vendor and Agent recognize that Agent may desire a mid-job change in the specifications that would add time and cost to the specified work and possible inconvenience to the Vendor. If this requires adjustments to this Agreement, the parties shall make a good faith attempt to agree on all necessary particulars. Such agreements shall be put in writing, signed by the parties, and added to this Agreement. No change in orders shall be made unless upon the written and signed agreement of both parties and should Vendor fail to obtain the Agent's prior written approval, then Vendor will be due no remuneration for change order work completed in advance of such authorization. Vendor must submit the Change Order form with sufficient photos of the items that need attention and receive the required signatures prior to commencement of any work associated with the change.

8. WHAT CONSTITUTES COMPLETION

The work specified in each Scope of Work shall be considered completed upon approval by Agent, provided that Agent's approval shall not be unreasonably withheld. Completion of the specified work in a workmanlike manner shall be considered sufficient grounds for Vendor to require final payment by Agent. Completion shall be defined as the completion of one hundred percent (100%) of the tasks indicated on the work order. Agent and Vendor reserve the right to have the scope of work inspected by a third party, certified engineer, or others to satisfy or confirm completion. Vendor and Agent agree to work with and satisfy requirements and concerns of such third party.

9. PAYMENT TERMS

As a condition of payment for invoices over \$1000 (one thousand dollars), Vendor shall submit to Agent a notarized, final waiver of lien for all labor, equipment and materials included in the invoice, all in such form that is acceptable to Agent and compliant with applicable laws. Invoices submitted without a notarized lien waiver will not be processed. Invoices less than \$1000 may be submitted without a lien waiver.

When Vendor believes the Scope of Work to be 100% complete, Vendor will notify Agent. Notification should be sent directly to the GOAL team member who assigned the work order. Agents, or Agents' designated representative, will conduct its own inspection of the work and will notify Vendor of acceptance or deficiencies via email. Once work has been accepted, Vendor may invoice Agent for final payment.

Agent will make payment to the Vendor on the regular payment schedule established by the Agents unless any of the following conditions exists: 1) Vendor is in default of any of its obligations under this agreement; 2) any part of such payment is attributable to work which is defective or not performed in accordance with this agreement; 3) Vendor has failed to make payment(s) promptly to Vendors subcontractors or for material or labor used in the work for which Agents have made payment to Vendor. Payments withheld for any of the foregoing reasons shall be released as soon as reasonably possible following elimination or removal of the grounds for nonpayment.

Payment schedule will be as follows: 1) 100% of payment to be processed by Agent upon the delivery of completion photos, copy of all pulled & closed permits, final invoice and notarized lien waiver form, if applicable. 2) Any change orders, which also must be 100% complete, should be invoiced in full upon completion.

Invoice package must be sent to accountspayable@goalproperties.com.

10. WARRANTIES

Vendor will complete the specified work in a workmanlike manner per standard practices prevalent in the Vendor's trade. Further, Vendor's work will carry an unconditional one-year warranty on materials and an unconditional 90-day warranty on labor for maintenance and repairs. During this time, Vendor will perform warranty work at no additional cost to Agents and in a reasonable timeframe. Full replacement of Roof, HVAC, Electrical, or Plumbing systems will require longer warranties as customarily provided for such work.

This warranty excludes damage caused by acts of God, building movement, and third party vandalism.

Vendor will be responsible for any damages to the buildings, grounds, and/or tenants' property caused by Vendor's work performance during the scope of work. This is to include, but not be limited to, automobile damage, resident property, and ground cover/landscaping.

Agents shall have the right to apply all or any portion of payments due to the Vendor at any time to satisfy Vendor's warranty obligations as to any projects completed by the Vendor on the following terms and conditions: 1) Agents shall notify Vendor via email of any defective workmanship. 2) Vendor shall have 72 hours after such notification to repair or replace defective work.

If Vendor fails to make such repair or replacement within such 72-hour period (or, if such repair is not capable of repair within such period, Vendor has not at least begun the repair), then Agents shall have the right to make such repair or replacement and deduct the costs incurred from all payments currently owed and future payments to Vendor without additional notice to Vendor.

11. TERMINATION

This agreement may be terminated by either party with a 7-day prior written notice to the other party. Vendor may terminate the agreement if Agents have failed to make payment to the Vendor for more than 30 days through no fault of the Vendor. Agents may terminate the agreement immediately if the Vendor persistently fails to carry out the work in accordance with the agreement, fails to supply properly skilled workers or proper materials, fails to make payment to subcontractors or vendors or disregards laws, ordinances or orders by public authorities. Vendor must complete all projects accepted to receive final payment for said project. In such an event that the Vendor does not complete in full a Scope of Work, Agents may take possession of the site and of all materials, equipment, tools and machinery thereon and may finish the work by whatever method Agents may deem expedient. Vendor authorizes Agents to apply any unpaid balances due to Vendor towards completion of any incomplete projects.

12. INDEMNIFICATION

To the fullest extent permitted by law, Vendor agrees to hold harmless and indemnify Agents, all entities listed on Exhibit D and the aforementioned current, future or former employees, agents, partners, directors, managers and officers from and against claims, damages, losses, costs, and attorney fees that arise out of the performance of the Vendor's work under this Agreement, provided that such claim, damage, loss of cost is attributable to bodily injury, sickness, disease or death of any person, including Vendor's employees and agents, or to injury to or destruction of tangible property, including loss of use, and is caused in whole or in part by the negligent acts or omissions of the Vendor, Vendor's subcontractors, or any individuals directly or indirectly employed by them or any for whose acts they may be liable, regardless of whether or not such claim, damage, loss or cost is caused by the negligence of any party indemnified hereunder. This indemnity obligation shall not be construed to negate, abridge, or otherwise reduce other rights or obligations of indemnity which would otherwise exist as to a party or person described in this Section.

13. INSURANCE

A. Vendor shall maintain and cause each of its subcontractors and agents to maintain and cause each of its subcontractors and agents to procure and maintain in force during the course of their work, policies of insurance as described below, which shall name all the entities (which includes their current, future or former employees, agents, partners, directors, managers and officers) listed on Exhibit D as additional insured, (excepting Worker's Compensation insurance) with limits of liability not less than the following:

1) Worker's Compensation Insurance Statutory

Employer's Liability Insurance:

- a) Bodily Injury by Accident \$1,000,000.00 each accident
- b) Bodily Injury by Disease \$500,000.00 each employee
- c) Bodily Injury by Disease \$500,000.00 policy limit

2) Comprehensive General Liability

- a) General Aggregate \$2,000,000.00
- b) Products/Comp/Op. Aggregate \$1,000,000.00
- c) Personal & Advertising Injury \$1,000,000.00
- d) Each Occurrence \$1,000,000.00
- e) Fire Damage \$50,000.00
- f) Medical Exp. (any one person) \$50,000.00

3) Comprehensive Automobile Liability

- a) Bodily Injury & Property Damage \$300,000.00 combined single limit

B. All insurance required under this Agreement shall be procured from insurance companies approved by Agents and admitted (or an authorized surplus line company) in the state where property is located for writing of insurance on risks located in said state. Vendor shall deliver all certificates of the above-specified insurance policies to Agents upon the start of work. All insurance policies must provide that they may not be canceled unless thirty (30) days prior written notice is given to Agents. All insurance policies must provide waivers of subrogation against Agents and the additional insured's hereunder.

C. Vendor agrees that entities (including the their current, future or former employees, agents, partners, directors, managers and officers) listed on Exhibit D shall not be liable to Vendor, or any of its respective employees, agents, patrons, subcontractors, suppliers, or any other person whatsoever for any injury or death to the person, caused by, resulting from, or arising out of negligence or any act of omission on the part of Vendor or its respective subcontractors or employees or the performance of the work described in this Agreement.

14. CERTIFICATES

Vendor agrees to provide Agents copies of all licenses and/or specialty certifications required by the state and local jurisdictions where property is located for all trade specific work being performed. All documents submitted must match the business and/or principal's name and signature on this agreement.

15. SITE MAINTENANCE

Vendor agrees to notify Agents and residents of work schedule and to clean and haul all trash daily. No trash may be stored on-site. No construction dumpster or trailer may remain on site more than 7 days. No trash may be deposited in the residence or neighboring residence's garbage cans. No advertising signs may be placed in front of the property.

Vendor also agrees to protect all Property's equipment and ground cover/landscape as well as all residents' property including automobiles. Should any damage occur to Property or residents' property, Vendor agrees to make immediate repairs and appropriations to Agent's satisfaction.

16. BUSINESS PRACTICES

Agents' employees are expected to act with integrity and follow all laws and regulations that govern its business activities. Agents have the same expectation of the Vendor when Vendor is conducting business with, or on behalf of, Agents.

Vendor and its subcontractors shall represent the Agents with professionalism and respect toward the tenants and the home (e.g.; no foul or rude language, wearing shoe coverings upon entering, etc.). Vendor shall be dressed in uniformed, company branded attire and shall exhibit good personal hygiene. All subcontractors will have undergone a background check before being assigned to a GOAL Properties job site.

Vendor will not offer gifts or entertainment to Agents or Agents' employees more than \$50.00 in value to avoid any conflict which could be considered a bribe, offer, or other arrangement or incentive to obtain goods or services. (Examples: meals, services, gift cards, tickets, electronics, etc.)

Vendor must disclose any relationship with any employee of the Agents prior to any contract negotiations. If the Vendor becomes aware of a conflict after commencement of services, the Vendor must immediately report the information to Agents.

17. ACCEPTANCE

It is understood and agreed that this Agreement may be executed in several identical counterparts, each of which shall be deemed an original for all purposes. Further, it is understood and agreed that this Agreement may be executed by the parties at different locations. In this regard, signature pages sent via facsimile, or email amongst these parties shall be deemed originals for all purposes.

AGREED AND ACCEPTED:

Vendor:	Agent:
Signed By: _____	Signed By: _____
Printed Name: _____	Printed Name: _____
Title: _____	Title: Properties Services
Date: ____/____/____	Date: _____

W9

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

**Request for Taxpayer
Identification Number and Certification**

**Give Form to the
requester. Do not
send to the IRS.**

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____

Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) Requester's name and address (optional)

6 City, state, and ZIP code

7 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 generally 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 instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number										
					-					

OR

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); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 3.

Sign Here	Signature of U.S. person ▶	Date ▶

FOR INSTRUCTIONS OR ADDITIONAL INFORMATION ON COMPLETING THE W-9 FORM. PLEASE VISIT [HTTPS://WWW.IRS.GOV/PUB/IRS-PDF/FW9.PDF](https://www.irs.gov/pub/irs-pdf/fw9.pdf)

EXHIBIT D TO COI

Names of Additional Insureds

The following exact language must be listed on each vendor's certificate of insurance:

“The following **four** entities are additional named insureds in respect to all policies listed on this Certificate of Insurance except for workers' compensation:

1. Morrocroft Neighborhood Stabilization Fund, L.P.
2. Morrocroft Neighborhood Stabilization Fund II, L.P.
3. Gorelick Brothers Capital, LLC
4. GBC Residential Management, LLC,

Add the following entity in addition to the above four:

5. GOAL Property Services, LLC

Add one of the following entities depending on the state(s) you are contracting to complete work in for GOAL in addition to the above five:

6. GOAL Properties-Indiana, LLC
7. GOAL Properties-Georgia, LLC
8. GOAL Properties-North Carolina, LLC
9. GOAL Properties-South Carolina, LLC
10. GOAL Properties-Texas, LLC
11. GOAL Properties-Florida, LLC
12. GOAL Properties-Oklahoma, LLC
13. GOAL Properties-Nevada, LLC
14. GOAL Properties-Maryland, LLC

Address of Additional Insureds:

6836 Morrison Blvd
Suite 320 and Suite 420
Charlotte, NC 28211

COI EXAMPLE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/29/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown & Brown Insurance of AZ, Inc 2800 North Central Avenue, Suite 1600 Phoenix AZ 85004	CONTACT NAME: Maria Rosaortega, CIC, CISR PHONE (A/C, No., Ext.): 602-664-7067 FAX (A/C, No.): E-MAIL ADDRESS: mrosaortega@bbphoenix.com														
INSURED VINESER-01 <div style="font-size: 2em; font-family: cursive; margin-top: 10px;">"Vendor Name"</div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Associated Industries Ins Co</td> <td>23140</td> </tr> <tr> <td>INSURER B : Amerisure Mutual Insurance Co</td> <td>23396</td> </tr> <tr> <td>INSURER C : Nationwide Ins Co of America</td> <td>25453</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Associated Industries Ins Co	23140	INSURER B : Amerisure Mutual Insurance Co	23396	INSURER C : Nationwide Ins Co of America	25453	INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : Associated Industries Ins Co	23140														
INSURER B : Amerisure Mutual Insurance Co	23396														
INSURER C : Nationwide Ins Co of America	25453														
INSURER D :															
INSURER E :															
INSURER F :															

COVERAGES **CERTIFICATE NUMBER:** 158225792 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD/ WSD	SUBR/ WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			AES1037087	1/1/2016	1/1/2018	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPROP AGG \$2,000,000 \$
C	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			3046473266	1/1/2017	1/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ * 300,000 PROPERTY DAMAGE (Per accident) \$ MINIMUM \$
B	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			WC2103748 WC2103747	1/1/2017 1/1/2017	1/1/2018 1/1/2018	EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Named Insureds: See attached Named Insured Schedule

Morrocroft Neighborhood Stabilization Fund, LP.
 Morrocroft Neighborhood Stabilization Fund II, L.P.
 Gorelick Brothers Capital, LLC
 GBC Residential Management, LLC
 GOAL Property Services, LLC
 GOAL Properties-Indiana, LLC

CERTIFICATE HOLDER Gorelick Brothers Capital, LLC 6836 Morrison Boulevard Suite 320 Charlotte NC 28211	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <div style="font-family: cursive; font-size: 1.2em;">Maria Rosaortega</div>
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LIEN WAIVER EXAMPLE

*Must be filled out correctly and completely. Must be Notarized.

<u>Owner</u>			<u>Contractor</u>		
Owner's Name/Bill to: <u>Buying Entity Shown on the PO</u>			Name: _____		
P.O. # <u>Purchase Order number indicated</u>			Address of Contractor: _____		
Property Address: <u>Location rehab is being completed</u>			_____		
_____	_____	_____	City	State	Zip Code
City	State	Zip Code	Telephone # _____		
			Contractor License #: _____		
			Contract Date: ____/____/____		

TO ALL WHOM IT MAY CONCERN:

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned Contractor hereby waives, discharges, and releases any and all liens, claims, and rights to liens against the above-mentioned Property, and any and all other property, either real or personal, owned by Owner which may have arisen as a result of the furnishing of labor, materials, and/or equipment, and the performance of work by the Contractor involving the Property.

The undersigned further hereby acknowledges that the sum of Total Amount of Purchase Order Written in Words Dollars (\$ Total Amount of Purchase Order Written in Numbers) constitutes the entire *unpaid* balance due the undersigned in connection with said work whether under said contract or otherwise and that the payment of said sum to the Contractor will constitute payment in full and will fully satisfy any and all liens, claims, and demands which the Contractor may have asserted against the Owner in connection with all work involving the property.

Dated this Date day of Month, 20 Year

Contractor: Name of Contractor

By: Signature of Contractor

Title: Contractor's Title in Company

STATE OF State Where Project Property is located

COUNTY OF County Where Project Property is located

The foregoing instrument was acknowledged before me this Date day of Month, 20 Year by Contractor. Proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Notary Public Signature

Notary Name Printed

(Seal)

WHO TO CONTACT

Onboarding paperwork, insurance updates, changes in markets serviced, work capacity, services offered, general vendor questions:

Marden Gonzalez Irias mgonzalez@goalproperties.com

Local Maintenance Managers:

Charlotte:	Gavin Suggitt	gsuggitt@goalproperties.com
Indianapolis:	Matthew Wallace	mwallace@goalproperties.com
Atlanta:	Keith Boyd	kboyd@goalproperties.com
Jacksonville:	Rick Noble	rnoble@goalproperties.com
Tampa:	Steve Barbier	sbarbier@goalproperties.com
Dallas:	Mike Lindquist	mlindquist@goalproperties.com
Houston:	Josh Gibson	jgibson@goalproperties.com
Oklahoma:	Tony Chesser	Tchesser@goalproperties.com

Bids, Inspections, Project Updates, Photos, Other information related to project:

Contact your local Maintenance Manager for Questions

Invoice Payment Inquiries:

*Payments are done electronically via ACH for GBC properties. Make sure to go to <https://docs.google.com/forms/d/1-wiw4jFSwcjq7sK-LHNnjOfJUBGXBhjRwVwTMWBUB2Y/edit?usp=sharing> to fill out bank's routing and account number. Man properties are paid via paper check until further notice.

*Contact your local Maintenance Manager to ensure all payment Requirements are satisfied

Lien Waivers:

Lien Waivers should be uploaded in the vendor portal under Property Documents

Lawn and Landscape Issues

*Services needed at a property – or to alert the lawn vendor that the exterior will be inaccessible on a particular date: Contact your local Maintenance Manager

Lockbox or Rekey Issues

*Problems with the lockbox or the keys on any of the exterior doors or if a padlock needs to be cut: Contact your local Maintenance Manager

Utilities Issues

*Getting electricity or water turned on at a property
William Bullock at wbullock@goalproperties.com