



Phone: (888) 770-2218
Fax: (336) 299-4199
Mail: 2450 NE Miami Gardens Dr.
2nd Floor
Aventura, FL 33180
Attn: Adam Supraski

Dear Vendor:

I would like to thank you for your interest in becoming an Authorized or Preferred Service/Sales Partner of EDGE Asset Management. I believe that our firm can offer your company great revenue opportunities from our rental and sales departments, as well as from our aggressive cooperative marketing campaigns.

Attached you will find the application for both the Authorized and Preferred provider relationships, you select the enrollment option you desire. The Preferred relationship does require membership into our cooperative marketing program, but offers some additional benefits like net 15 day remittance terms and more. It is my hope you will consider an investment into your business with our Preferred Provider Relationship.

Before we can process your application or release any payments to a vendor we must have the following documents.

Sole Proprietors (if check is to be made to person)

1. IRS Form W-9
 - a. Copy of Driver's License
 - b. Copy of Social Security Card
2. Occupational / Professional License
3. Proof of Liability Insurance
4. Proof of Workmen's Compensation Insurance

Corporations / Partnerships

1. IRS Form W-9
2. Occupational / Professional License
3. Proof of Liability Insurance
4. Proof of Workmen's Compensation Insurance

Cooperative Marketing Memberships:

1. Select Membership: Revenue sharing option where the Vendor agrees to contribute a marketing fee for referred services in the amount of 8 or 10% of the invoiced amount. (8% discount available for contributions greater than \$500)
2. Advantage Membership:
 - i. \$100 monthly
 - ii. \$250 quarterly
 - iii. \$850 annually



Authorized Service Provider Application

All vendors must submit a completed application for an Authorized Service Provider (ASP) status and furnish required documentation of eligibility. This application will be reviewed and verified for consideration of future assignments. All vendors making application must accept the Quality Commitment Agreement of the firm prior to any assignment. Our firm reserves the right to accept or reject any application.

ASP Preferred Membership

A preferred status is available to Authorized Service Providers. This membership requires annual, monthly and transaction based dues payable directly to the firm.

Electrical Repair	Plumbing Repair	Gas Plumbing Repair
HVAC Repair	Appliance Service	Pest Control
House Cleaning Services	Carpet Cleaners	Painting Contractors
Locksmiths	Roof Contractors	Trash Removal
General Maintenance	Carpentry	Landscaping
Security / Fire Service	Furniture Rental	Insurance
Legal / Accounting	Pool / Spa Service	Glass / Door / Screen
Septic	Sprinkler	

ASP Assignment Process

ASP agrees not to make any charge or action without the written authorization of the Company. Authorizations will be delivered in the form of a written request detailing all contact information and a cost limit. Preference of work order assignment is given to ASP Preferred Members. Consideration is then given to price structure followed by service availability.

ASP Performance Standard

Authorized Service Providers agree to establish a service date with the client within 24 hours of assignment for performance no later than 3 business days subsequent the assignment. In the event client is not contacted and/or service not performed within the term allowed, ASP agrees to contact Maintenance Coordinator for further authorization, instructions or reassignment. Our firm will provide access instructions and "No Show Penalty" compensation as per membership agreement with every assignment.

The ASP agrees to cancel, without liability to Company, any order for service prior to performance of any actual service or expenditure in behalf of ASP.

ASP agrees to notify Company prior to the performance of any service or expenditure that is anticipated to exceed the cost limit established in the Company's written order. In the event ASP elects to perform such service or expenditure without informed consent, the ASP agrees waive any amount exceeding the written cost limit.

Invoice Terms

The ASP agrees that Company is only a referral agency in behalf of Owner. Company has limited authority to request maintenance services in behalf of Owner. All work performed is a relationship between the ASP and the Owner directly. The Company is a limited agent of the Owner.

ASP agrees to extend finance terms consisting of the net balance due in thirty (30) days upon receipt, unless advance written agreement is made to the contrary.

ASP agrees to submit an invoice describing in detail the services rendered and accounting itemization, the date of service, the person performing service, as well as return the original Company maintenance request or order number issued. Any invoice not containing this information may be returned for completion and payment terms extended accordingly.

ASP Access to Property

Keys will be released in accordance with Tenant authorization/notice. Duplication or subsequent distribution of any access is key is strictly prohibited. Any key checked to ASP must be returned within 3 business days or be subject to costs of re-keying the unit as if the key was lost. ASP assumes all responsibilities related to access.

ASP Warranty

The ASP agrees to provide a written warranty for parts and labor of any service performed for a minimum period of thirty (30) days from the date of completion. In the event a warranty term is not specifically stated, ninety (90) days shall be the warranty term. This warranty only covers failures due to defects in materials or workmanship which occur during the normal use or operation and does not cover damage which result from accident, misuse, abuse, neglect, mishandling, misapplication, improper maintenance, alteration, modification or service by anyone else other than the initial servicer, or damage that is attributable to acts of God. This warranty is further modified by all rights and remedies allowable by state law. In the event a warranty claim is filed, the ASP agrees to quickly remedy such at no additional cost whatsoever or to refund/cancel all charges of the initial service invoice. In the event a dispute arises as to the validity of claim, the ASP shall submit notice of dispute in writing to consumer detailing the reasons within three (3) days of claim notice. The consumer shall then have option to seek an independent review by a qualified party within 7 days of dispute notice and results deemed conclusive.

Sign / Date

Electrical Repair	Plumbing Repair	Gas Plumbing Repair
HVAC Repair	Appliance Service	Pest Control
House Cleaning Services	Carpet Cleaners	Painting Contractors
Locksmiths	Roof Contractors	Trash Removal
General Maintenance	Carpentry	Landscaping
Security / Fire Service	Furniture Rental	Insurance
Legal / Accounting	Pool / Spa Service	Glass / Door / Screen
Septic	Sprinkler	

Authorized Provider Information

Company Name:

Address:

City / State / Zip:

Office phone: () Fax phone: ()

Toll Free: () Pager: ()

Mobile: () Emergency: ()

E-Mail: Website http://www.

Contact Person(s):

Tax ID

Insurance Company Expire Date

Workmen's Comp Expire Date

County License #

City or Zip Code (Areas Served)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Description of Service / Product)

Operating Hours

Monday - Friday	<input type="text"/>
Saturday	<input type="text"/>
Sunday	<input type="text"/>

FEE SCHEDULE

Service Call: Additional description:

Hourly Rate:

Discount Available:

Quality Commitment Pledge

By acknowledgement of this application, I agree to all terms and conditions contained herein.

Date: _____ By: _____



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Preferred Service/Sales Partner Marketing Agreement

This ___ day of _____, _____

WHEREAS EDGE Asset Management (EAM) intends to recommend certain "PREFERRED" vendors to their customers; and
WHEREAS _____ would like to participate in the program as a "preferred vendor"; and WHEREAS both EAM and Vendor wish to work jointly in delivering this marketing and promotion program to the public, NOW THEREFORE the parties do hereby agree as follows:

PURPOSE The PREFERRED Sales/Service Program is designed to provide a valuable service to EAM clients by providing said clients with referrals to reputable vendors who will deliver quality products and services at volume discount prices, in a timely manner, as well as provide excellent product and service warranties. EAM agrees to recommend vendor to customers who request information or help. EAM agrees to present the vendor's product or service in a format acceptable to vendor, and to assist the customer with ministerial support to do business with the vendor. ([] email/web [] newsletter [] in-office marketing [] print medias) EAM agrees to offer the referral program to all Buyers and Sellers of residential real estate through their brokerage company during the next twelve months, including the above mentioned vendor information. EAM shall also promote the program through print advertising, Internet advertising, internal sales meetings and other promotions.

Vendor agrees to look solely to the customer for payment of any sums due for service rendered or goods delivered; vendor further agrees to indemnify and hold EAM harmless of any and all claims that may arise from customers as a result of any work performed by vendor.

Vendor agrees to cooperate with EAM to facilitate the referral of customers to the vendor by EDGE Asset Management. Vendor agrees to supply EAM with a photocopy of any and all required licenses, and insurance or bonding required by any local, state, or federal law or agency, to assure Vendor is properly licensed to conduct their business. Vendor also agrees to add EAM as an additionally insured party to vendor's current business liability insurance coverage.

Vendor agrees to provide EAM with promotional material to be presented to the customers of EAM, or a supply of pre-printed materials sufficient to present to all customers. Vendor further agrees to provide their product or service in a timely professional manner and to abide by the service pledge attached to this agreement. EAM agrees to provide personnel to be available to the customers during normal business hours to assist in referring business to vendors during the next twelve months.

In consideration of the above and to offset marketing expenses, the vendor shall pay a marketing fee to EAM in the amount of:
[] ___% of gross sales/business that is referred to the vendor from the Concierge Service Department or any representative of EAM.
[] \$ ___ per month / quarter / year

Payment shall be received when vendor has received payment for services rendered. Payment should be made payable to EAM and remitted to 240 NE Miami Gardens Dr. 2nd Floor Miami FL 33180, Attn: Adam Supraski. EAM does not guarantee Vendor any business. However, EAM agrees to present Vendor program in a professional manner, in an effort to assure increased business to vendor.

This constitutes the entire agreement between the parties, and any changes or modifications shall be reduced to writing and signed by both parties.

This agreement expires one year from date of signing.

Vendor: _____
By: _____
Its _____

EDGE Asset Management: _____

Request for Taxpayer Identification Number and Certification

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

Please print or type

Name (See Specific Instructions on page 2.)	
Business name, if different from above. (See Specific Instructions on page 2.)	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. 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 2.** 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 2.
Note: *If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.*

Social security number								

or

Employer identification number								

Part II For U.S. Payees Exempt From Backup Withholding (See the instructions on page 2.)

List account number(s) here (optional)

Part III 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. person (including a U.S. resident alien).

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 2.)

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

A person who is required to file an information return with the IRS must get 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 give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

If you are a foreign person, use the appropriate Form W-8. See **Pub. 515**, Withholding of Tax on Nonresident Aliens and Foreign Corporations.

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.*

What is backup withholding? Persons making certain payments to you must withhold and pay to the IRS 31% of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. **Payments you receive will be subject to backup withholding if:**

- You do not furnish your TIN to the requester, or
- You do not certify your TIN when required (see the Part III instructions on page 2 for details), or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions and the separate **Instructions for the Requester of Form W-9**.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name. If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first and then circle the name of the person or entity whose number you enter in Part I of the form.

Sole proprietor. Enter your **individual** name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, **enter the owner's name on the "Name" line.** Enter the LLC's name on the "Business name" line.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Part I—Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box.

If you are a **resident alien** and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see **How to get a TIN** below.

If you are a **sole proprietor** and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are an **LLC** that is **disregarded as an entity** separate from its owner (see **Limited liability company (LLC)** above), and are owned by an individual, enter your SSN (or "pre-LLC" EIN, if desired). If the owner of a disregarded LLC is a corporation, partnership, etc., enter the owner's EIN.

Note: See the chart on this page for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get **Form SS-5**, Application for a Social Security Card, from your local Social Security Administration office. Get **Form W-7**, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN or **Form SS-4**, Application for Employer Identification Number, to apply for an EIN. You can get Forms W-7 and SS-4 from the IRS by calling 1-800-TAX-FORM (1-800-829-3676) or from the IRS's Internet Web Site at www.irs.gov.

If you do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all

such payments until you provide your TIN to the requester.

Note: Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Part II—For U.S. Payees Exempt From Backup Withholding

Individuals (including sole proprietors) are **not** exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. For more information on exempt payees, see the separate Instructions for the Requester of Form W-9.

If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding. Enter your correct TIN in Part I, write "Exempt" in Part II, and sign and date the form.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

Part III—Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 3, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required).

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified state tuition program payments, IRA or MSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to give your correct TIN to persons who must file information returns with the IRS to

report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or MSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 31% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
5. Sole proprietorship	The owner ³
For this type of account:	Give name and EIN of:
6. Sole proprietorship	The owner ³
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name, but you may also enter your business or "DBA" name. You may use either your SSN or EIN (if you have one).

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

