



DEAR SUBCONTRACTOR:

JMD Global Developers, LLC, prides itself in keeping good relationships with its clients and employees. JMD Global believes people are what make everything possible. If you are a subcontractor interested in building a productive, honest partnership with an honest company, please feel free to fill out our prescreening form and JMD Global Developers LLC will be honored to give you and your company an opportunity to build a lasting relationship.

**Sincerely,
JMD Global Developers, LLC**



The following is important information that must be followed in order for JMD Global developers, LLC to use your services:

SUBCONTRACTORS:

Please supply the following data:

- **Subcontractor Information Form** – fill in and return attachment A
- **Subcontractor Indemnification Agreement** – sign and return attachment B
- **Certificate of Insurance** – see attachment C for requirements of W-9 Request for Taxpayer Identification – fill in and return

IMPORTANT: Any subcontractor who fails to meet the requirements described in Attachment C, regarding Certificates of Insurance, will be invoiced at the rate described in item 2 of Attachment C.

JMD Global requires a Job Number, Name and Subcontractor:

Date, including the Month, Day & Year, of Completion on your invoices. If this information is not on the invoice, it will be returned to you to be filled out. Should your invoice be returned for any reason, the re-submitted invoice will be paid in the next appropriate billing cycle. Subcontractors will be paid monthly on the 15th of each month and the 30th of each month. All invoices must be turned into our office by the 25th of each month paid on the 15th of the following month and the 10th of each month to be paid on the 30th of the same month.

Your cooperation in these matters will be greatly appreciated and will make doing business with your firm much smoother.

Thank you. We look forward to doing business with you.



ATTACHMENT A SUBCONTRACTOR INFORMATION FORM

Business name	_____
ADDRESS	_____
CITY, STATE, ZIP	_____
CONTACT INFORMATION	OFFICE PHONE: _____ CONTACT PHONE: _____ EMAIL: _____
Incorporated	YES _____ If yes, Federal ID# _____ NO _____
CONTRACTOR'S LICENSE	_____



ATTACHMENT B SUBCONTRACTOR'S INDEMNIFICATION AGREEMENT

Subcontractor agrees to defend, indemnify and hold harmless JMD Global Developers LLC, owner, their employees and agents from any and all claims, demands, losses and liabilities to or by third parties arising from, resulting from or connected with services performed or to be performed under this Subcontract by Sub-contractor or Subcontractor's agents or employees to the fullest permitted by law and subject to the limitations provided below. Subcontractor's duty to indemnify Contractor shall not apply to liability for damages arising out of bodily injury to persons or damage to property caused by or resulting from the sole negligence of Contractor or Contractor's agent or employees. Subcontractor's duty to indemnify Contractor for liability for damages arising out of bodily injury to persons or damage to property caused by or resulting from the concurrent negligence of (a) Contractor or Contractor's agents or employees and (b) Subcontractor or Sub-contractor's agents or employees, shall apply only to the extent of negligence of Subcontractor or Subcontractor's agents or employees. Subcontractor specifically and expressly waives any immunity that may be granted it under the Florida Industrial Act, Title 51 RCW. Further, the indemnification obligation under this Subcontract shall not be limited in any way by any limitation on the amount of type of damages, compensation or benefits payable to or for any third party under worker's compensation acts, disability benefits acts, or other employee benefits act. Subcontractor's duty to defend, indemnify and hold Contractor harmless shall include, as to all claims, demands, losses and liability to which it applies, Contractor's personnel-related costs, reasonable attorney's fees, costs and all other claim-related expenses

**THE UNDERSIGNED HEREBY CERTIFYS THAT THIS ADDENDUM WAS MUTUALLY
NEGOTIATED.**

CONTRACTOR:

Dated this ____ day of _____, 20 ____

Signature

Title: _____

SUBCONTRACTOR:

Dated this ____ day of _____, 20 ____

Signature

Title: _____



ATTACHMENT C

SUBCONTRACTOR'S LIABILITY INSURANCE ENDORSEMENT

It is hereby understood and agreed that the following special conditions are made a part of the policy:

1. JMD Global Developers LLC Shall require all subcontractors during the period of their contract to maintain Commercial General Liability insurance coverage (underwritten by an insurance company with at least an A-Best rating), with minimum limits of \$1,000,000 per occurrence (\$2,000,000 aggregate). JMD Global Developers LLC. shall also require all subcontractors to include JMD Global Developers LLC. as an Additional Assured on the subcontractor's policy. The specific language should read: **"JMD Global Developers, LLC and (Project Owner) are added as additional insured for general liability and excess liability policies. This insurance is primary and non-contributory."** Furthermore, JMD Global Developers LLC shall obtain "Certificates of Insurance", to evidence such coverage, from all subcontractors. In addition, JMD Global Developers LLC Shall require that all subcontractors shall hold JMD Global Developers LLC harm- less.
2. Failure to comply with the above condition does not alter the coverage provided by this policy. However, should JMD Global Developers LLC Fail to comply, for the sole purpose of computing rates and premium, independent contractors will be considered employees of JMD Global Developers LLC. and a premium charge at a rate of \$15.00 per \$100.00 of cost for the independent contractors will be made accordingly.
3. Commercial General Liability coverage maintained by subcontractors shall be primary and this policy shall be excess of the Limits of Liability of such insurance, notwithstanding the language of any other provisions in the policy.
4. JMD Global Developers, LLC. requires all subcontractors during the period of their contract to maintain Workman's Comp. insurance coverage (underwritten by an insurance company with at least an A-Best rating), JMD Global Developers, LLC shall also require all subcontractor to include JMD Global Developers, LLC as an Additional Assured on the subcontractor's policy. JMD Global shall obtain "Certificates of Insurance" to evidence of such coverage, from all subcontractors. In addition JMD Global Developers, LLC shall require that all sub-contractors shall hold JMD Global Developers, LLC. harmless.

Request for Taxpayer Identification Number and Certification

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

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	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 of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	Exempt payee code (if any) _____
	<input type="checkbox"/> C Corporation	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> S Corporation	(Applies to accounts maintained outside the U.S.)
	<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) ► _____		
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.		
<input type="checkbox"/> Other (see instructions) ►		
5 Address (number, street, and apt. or suite no.) See instructions.		
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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	

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); and
4. 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 for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



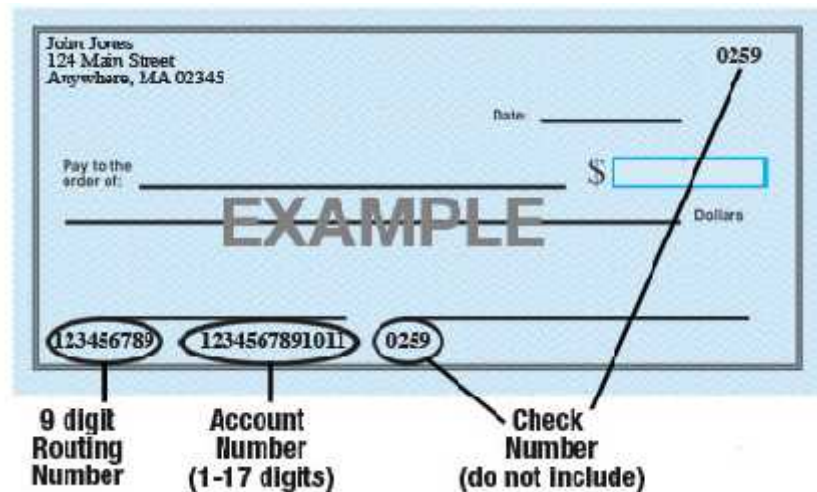
Direct Deposit Authorization Form

Please print and complete ALL the information below.

Name: _____

Address: _____

City, State, Zip: _____



Name of Bank: _____

Account #: _____

9-Digit Routing #: _____

Type of Account: Checking Savings (Circle One)

Please attach a voided check for each bank account to which funds should be deposited.

JMD Global Developers is hereby authorized to directly deposit my pay to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Subcontractor Signature: _____

Date: _____