Customer #

Streamlined Sales and Use Tax Agreement

Certificate of Exemption

This is a multistate form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

1 ☐ Check if you are attaching the Multistate Supplemental form.

N C If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.

2 ☐ Check if this certificate is for a single purchase and enter the related invoice/purchase order # _____.

3 **Please print**

Name of purchaser

Business address | City | State | Zip code

Purchaser's tax ID number | State of issue | Country of issue

If no tax ID number, enter one of the following: | FEIN | Driver's license number/State issued ID number (*state of issue* *number*) | Foreign diplomat number

Name of seller from whom you are purchasing, leasing or renting

Southern States Cooperative, Inc.

Seller's address	City	State	Zip code
6606 West Broad St	**Richmond**	**VA**	**12345**

4 **Type of business.** Circle the number that describes your business.

01 Accommodation and food services
02 Agricultural, forestry, fishing, hunting
03 Construction
04 Finance and insurance
05 Information, publishing and communications
06 Manufacturing
07 Mining
08 Real estate
09 Rental and leasing
10 Retail trade
11 Transportation and warehousing
12 Utilities
13 Wholesale trade
14 Business services
15 Professional services
16 Education and health-care services
17 Nonprofit organization
18 Government
19 Not a business
20 Other *(explain)*_____

5 **Reason for exemption.** Circle the letter that identifies the reason for the exemption.

A Federal government *(department)*_____
B State or local government *(name)*_____
C Tribal government *(name)*_____
D Foreign diplomat #_____
E Charitable organization #_____
F Religious or educational organization #_____
G Resale #_____
H Agricultural production #_____
I Industrial production/manufacturing #_____
J Direct pay permit #_____
K Multiple points of use (services, digital goods, or computer software delivered electronically)
L Direct mail #_____
M Other *(explain)*_____

6 **Sign here.** *I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.*

Signature of authorized purchaser | Print name here | Title | Date

(Rev. 3/06-2)

Customer # Client # 457 R E C