



Certificate of Exemption

Purchaser: Complete this certificate and **give it to the seller.**

Seller: If this certificate is not fully completed, you must charge sales tax. Keep this certificate as part of your records.

This is a blanket certificate, unless one of the boxes below is checked, and remains in force as long as the purchaser continues making purchases, or until otherwise cancelled by the purchaser.

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

If you are a contractor and have a purchasing agent agreement with an exempt organization, check the box to make multiple purchases for a specific job. Enter the exempt entity, name and specific project:

Exempt entity name _____ Project description _____

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, FEIN _____ Driver's license number/State issued ID number _____
 enter one of the following: state of issue number

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

Seller's address _____ City _____ State _____ Zip code _____

Type of business

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

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

Reason for exemption

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

- | | |
|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| A Federal government (department) _____ | I Industrial production/manufacturing |
| B Specific government exemption (from list on back) _____ | J Direct pay permit # _____ |
| C Tribal government (name) _____ | K Multiple points of use (services, digital goods, or computer software delivered electronically) |
| D Foreign diplomat # _____ | L Direct mail |
| E Charitable organization # _____ | M Other (enter number from back page) _____ |
| F Religious or educational organization # _____ | N Percentage exemption |
| G Resale | <input type="checkbox"/> Advertising (enter percentage) _____ % |
| H Agricultural production | <input type="checkbox"/> Utilities (enter percentage) _____ % |

Sign here

I declare that the information on this certificate is correct and complete to the best of my knowledge and belief. (PENALTY - If you try to evade paying sales tax by using an exemption certificate for items or services that will be used for purposes other than those being claimed, you may be fined \$100 under Minnesota law for each transaction for which the certificate is used.)

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