

E-595E

Streamlined Sales and Use Tax Certificate of Exemption

Do not send this form to the Streamlined Sales Tax Governing Board or the NC Department of Revenue. Send the completed form to the seller and keep a copy for your records. This is a multi-state form for use in the states listed. Not all states allow all exemptions listed on this form. The purchaser is responsible for ensuring it is eligible for the exemption in the state it is claiming the tax exemption from. Check with the state for exemption information and requirements. **The purchaser is liable for any tax and interest, and possible civil and criminal penalties imposed by the state, if the purchaser is not eligible to claim this exemption.**

1 ☐ Check if this certificate is for a single purchase. Enter the related invoice/purchase order # _____

2 A. Purchaser's name _____

B. Business address _____ City _____ State _____ Country _____ Zip code _____

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

D. Seller's address _____ City _____ State _____ Country _____ Zip code _____

3 Purchaser's type of business. Check the number that describes your business.

- | | |
|--|--|
| ☐ 01 Accommodation and food services | ☐ 11 Transportation and warehousing |
| ☐ 02 Agricultural, forestry, fishing, and 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 |
| ☐ 10 Retail trade | ☐ 20 Other (explain) _____ |

4 Reason for exemption. Check the letter that identifies the reason for the exemption.

- | | |
|--|--|
| ☐ A Federal government (department) _____ | ☐ H Agricultural production # _____ |
| ☐ B State _____ government (name) _____ | ☐ I Industrial production/manufacturing # _____ |
| ☐ C Tribal government (name) _____ | ☐ J Direct pay permit # _____ |
| ☐ D Foreign diplomat # _____ | ☐ K Direct mail # _____ |
| ☐ G Resale # _____ | ☐ L Other (explain) _____ |

5 Identification (ID) number. Enter the ID number as required in the instructions for each state in which you are claiming an exemption. If claiming multiple exemption reasons, enter the letters identifying each reason as listed in Section 4 for each state.

ID Number	State/Country	Reason	ID Number	State/Country	Reason
AR	_____	_____	NV	_____	_____
GA	_____	_____	OH	_____	_____
IA	_____	_____	OK	_____	_____
IN	_____	_____	RI	_____	_____
KS	_____	_____	SD	_____	_____
KY	_____	_____	TN	_____	_____
MI	_____	_____	UT	_____	_____
MN	_____	_____	VT	_____	_____
NC	_____	_____	WA	_____	_____
ND	_____	_____	WI	_____	_____
NE	_____	_____	WV	_____	_____
NJ	_____	_____	WY	_____	_____

6 Sign and Date. 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 _____

Phone number _____ E-mail address _____