

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 Group: Project description COMMUNITY CENTER ADMISSIONS

Please print	Name of purchaser			
	Individual's name (not group name):			
	Business address		City	State
				MN
	Purchaser's tax ID number		State of issue	Country of issue
	ES (not 41-xx or 39-xx)		Minnesota	United States
If no tax ID number, enter one of the following:		FEIN	Driver's license number/State issued ID number	
		state of issue	number	
Name of seller from whom you are purchasing, leasing or renting				
CITY OF SHOREVIEW				
Seller's address		City	State	
4600 VICTORIA STREET NORTH		SHOREVIEW	MN	
			Zip code	
			55126	

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. 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 # <u>ES</u> _____	M Other (enter number from back page) _____
F Religious or educational organization # <u>ES</u> _____	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	SIGN HERE	Print name here	Title	Date
_____		_____	_____	_____