

**PART A**

1. PURCHASER	D/B/A
ADDRESS	CITY, STATE, AND ZIP
2. SELLER	D/B/A
ADDRESS	CITY, STATE, AND ZIP
3. PRODUCT OR SERVICES PURCHASED	
4. PURCHASER'S TYPE OF BUSINESS	
5. CLAIMING EXEMPTION FOR  <input type="checkbox"/> RESALE (COMPLETE PART B BELOW) <input type="checkbox"/> PLANT EXPANSION <input type="checkbox"/> NEW PLANT <input type="checkbox"/> REPLACEMENT MACHINERY, EQUIPMENT & PARTS <input type="checkbox"/> INGREDIENT OR COMPONENT PART <input type="checkbox"/> WHOLESALERS (TAX ID NOT REQUIRED) <input type="checkbox"/> AGRICULTURAL <input type="checkbox"/> COMMON CARRIER <input type="checkbox"/> OTHER (EXPLAIN) _____ _____ _____ _____	

**PART B**

IF CLAIMING EXEMPTION FOR RESALE, PLEASE COMPLETE THE FOLLOWING

1. PURCHASER'S HOME STATE	2. PURCHASER'S STATE TAX I.D. NUMBER
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3. GENERAL DESCRIPTION OF PRODUCT TO BE PURCHASED FROM THE SELLER \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
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**Note:** Illinois does not have an exemption on sales of property for subsequent lease or rental.

**Caution to Seller:** In order for the certificate to be accepted in good faith by the seller, the seller must exercise care that the property being sold is of a type normally sold wholesale, resold, leased, rented, or utilized as an ingredient or component part of a product manufactured by the buyer in the usual course of business. In some states or cities, a seller failing to exercise due care could be held liable for the sales tax due.

Please see reverse side of this form for statutory references.

**PART C**

I SWEAR OR AFFIRM THE INFORMATION ON THIS FORM IS TRUE AND CORRECT AS TO EVERY MATERIAL MATTER.

AUTHORIZED SIGNATURE (PURCHASER OR PURCHASER'S AGENT)	DATE
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