Resale Certificate

New York State Department of TAXATION and FINANCE	Department of New York State and Local Sales and Use Tax and FINANCE			To Vendors: You must collect tax on a sale of texable property or services unless the purchaser gives you a property completed exemption document not later than 90 days efter delivery of the property sold or service rendered. In addition, you must keep tin certificate for at least 3 years as explained in the instructions.
To Purchasors and Vendors:				
Read instructions on back carefully before completing OR eccepting this Certificate.	CANNOT BE USED TO PURCHASE AUTOMOTIVE FUEL			
	B.A.C. SALES, INC.			man sections.
NAME OF VENDOR		1.70 (1100 100 100 100 100 100 100 100 100	DATE	
	1871 ROUTE 9H			
STREET ADDRESS	IIIIDOON NY 4050		Check Applicable E	lox
	HUDSON, N.Y. 1253	4	C Cloude Do	unhan Castillanta
CITY	SIAIE	ZIP CODE	□ Single Purchase Certificate □ Blanket Certificate	
l, the undersigned, he				
 I hold a valid Ce 	rtificate of Authority, #	hou Balas The Monday III Number	, to co	llect New York State
and local sales a	nd use tax, and that this Certificate	has not been susp	ended or revoked	l ,
I am principally	engaged in (indicate nature of busines	38)		
4 50 550 55	orchasing the (check applicable box or tole personal property other than autor	5524 5m2 3535 3	e in its present for	m or se s
	onent part of tangible personal prope		e iii iis present ioi	iii oi as a
where the se	ole personal property other than autor s such property becomes a componer ervices are performed or will be actua nction with the performance of the se	nt part of the tangib lly transferred to the	le personal proper	ty upon which
C. 🗆 service	ce for resale.			
resale and that I will and subsequently use	s certificate may not be used to mai pay the use tax on tangible persona ed or consumed in a taxable manner penalties and interest, for any error	I property or servi	ces purchased punderstand that I w	rsuant to this certificate vill be liable for the tax
	SUBSTANTIAL PENALTIES will re (See back	esult from misuse of this form)	of this certificate	•
SIGNATURE OF OWNER, P	ARTINER, OFFICER OF CORPORATION, ETC.	NAME OF PURCHAS	ER	
TITLE		STREET ADDRESS		
		CITY	SIATE	ZIP CODE