

RESALE CERTIFICATE

1.	Name of	Seller:						
2.	. Name of Buyer/Business:							
3.	Address	of Buy	er:Street			City	State	Zip Code
4.	Buyer's UBI/Revenue Registration Number:							
5.	Buyer is i	Buyer is in the business of:						
6.	Types of items purchased for resale:							
		appro	priate box): or resale in the or use as an in ersonal prope, s a chemical to roperty to be p or use as feed, s a farmer. uyer acknowle ories listed on ege subjects th	e regular course gredient or come ty to be produce for sale seed, seedlings, dges that it is so line 6. The buy	e of business apponent part ced for sale, occessing a new le, or fertilizer, or olely responsive acknowled nalty of 50 per acknowled to the control of the centrol of the c		ing use. of tangible ble personal in its capacity ng within the	
Pri	nt Name:			Name of Person Au	nthorized By the I	Buyer to Sign the Resa	ale Certificate	
Sig	gnature:							
2	_			Signatu	ure of Authorized	Agent of the Buyer		
Effective Date:								
					(Not To Ex	ceed 4 Years)		
Da	te Signed:							
		Se				nd to Department 130 and WAC 4		

For tax assistance visit http://dor.wa.gov or call (800) 647-7706. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 486-2342. Teletype (TTY) users may call (800) 451-7985.