



TAX ID FORM

NOTE: To expedite our processing, please email this form as soon as possible to jhoatson@texasliquids.com and fax a SIGNED copy to our corporate headquarters at 973-530-2653

Customer Federal ID#: _____ Customer Name _____

Product purchased: **Propane** Type of Business: Retailer / Manufacturer / Other _____ (Check one)

WITH REGARD TO STATE SALES TAX, THE FOLLOWING BILLING INSTRUCTIONS SHOULD BE FOLLOWED:

A I am not exempt from the sales tax on my purchases.

B I am exempt from sales tax on the following petroleum products:

_____ for the reasons checked below:

- Purchase for resale.
- Product(s) purchased will become an ingredient or component part of articles manufactured or compounded for sale.
- Exempt Industry: (checkone) Farming / Mining / Manufacturing / Other-explain: _____

Other reason for sales tax exemption. Explain in detail. _____

OTHER TAXES / EXEMPTIONS:

- I am licensed for Motor Fuel or Special Fuel and pay the fuel tax to the state.

Special Fuels License #: _____ Other (explain) _____

Motor Fuels License #: _____ My ICC# _____

<u>SHIP-TO STATE</u>	<u>TAX #</u>	<u>PERMIT #</u>

I UNDERSTAND THAT I AM SOLELY RESPONSIBLE FOR PURCHASING WITHIN THE ABOVE CATEGORIES AND ACKNOWLEDGE THAT MISUSE OF THE RESALE PRIVILEGE CLAIMED BY USE OF THE CERTIFICATE MAY SUBJECT ME TO PENALTIES AND INTEREST IMPOSED BY THE VARIOUS STATES AS WELL AS THE TAX."

This certificate shall be considered as part of each order unless written notice is given to the contrary, and it shall remain in effect until revoked in writing or expired by state statute. The undersigned purchaser further agrees that should the sale to him be later held subject to tax, he assumes full liability.

SIGNATURE OF AUTHORIZED AGENT

DATE

PRINTED NAME OF AUTHORIZED AGENT

TITLE OF AUTHORIZED AGENT