



## RESALE CERTIFICATE

1. Name of Seller: \_\_\_\_\_
2. Name of Buyer/Business: \_\_\_\_\_
3. Address of Buyer: \_\_\_\_\_  
Street, City, State & Zip Code
4. Buyer's Tax Registration Number: \_\_\_\_\_
5. Buyer is in the business of: \_\_\_\_\_
6. Types of items purchased for resale: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*The buyer certifies that it is purchasing the items listed on line 6 (please check appropriate box):*

- For resale in the regular course of business without intervening use.*
- For use as an ingredient or component part of a new article of tangible personal property to be produced for sale,*
- as a chemical to be used in processing a new article of tangible personal property to be produced for sale, or*
- for use as feed, seed, seedlings, fertilizer, or spray materials in its capacity as a farmer.*

*The buyer acknowledges that it is solely responsible for purchasing within the categories listed on line 6. The buyer acknowledges that misuse of the resale privilege subjects the buyer to a penalty of 50 percent of the tax due, in addition to the tax, interest, and any other penalties imposed by law.*

Print Name: \_\_\_\_\_  
Name of Person Authorized By the Buyer to Sign the Resale Certificate

Signature: \_\_\_\_\_  
Signature of Authorized Agent of the Buyer

Effective Date: \_\_\_\_\_ through \_\_\_\_\_  
(Not To Exceed 4 Years)

Date Signed: \_\_\_\_\_

**Seller must maintain a copy. Please do not send to Department of Revenue.  
Reference Rule and Statute (RCW 82.08.130 and WAC 458.20.102)**

For tax assistance, visit <http://dor.wa.gov> or call 1-800-647-7706. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 705-6715. Teletype (TTY) users may call 1-800-451-7985.