



Dear Valued Customer:

**The State of Michigan** requires us to keep a **signed** form that clearly indicates the basis of your tax exemption on file before your account can be tax exempt.

To stay in compliance (**with the State of Michigan**) we need you to fill out the following form and return it to us. Please be sure to include your account number to ensure proper placement of the exemption status.

The state requires us to charge sales tax to every customer that does not have a **signed** and **completed** form on file. Sending a copy of your licence on will not make you eligible for tax exempt status.

Any Customer who does not return the completed form **will be charged** six percent sales tax, plus any applicable county tax.

You may return the completed form by either postal mail, fax or e-mail.

Thank you,

*Carol Spoerl*

Carol Spoerl  
Credit Manager



# Michigan Sales Tax Exemption Certificate

To: Lane Automotive, Inc. dba Motor State Distributing

The undersigned hereby certifies that all items, except as indicated hereon, are purchases:

### Section I – Check One Of The Following

- One time purchase
- Blanket certificate (Note: A blanket certificate is valid for four years from the date of signature unless an earlier expiration date is listed below.)  
Expiration date, if less than four years: \_\_\_\_\_

### Section 2 – Basis For Exemption Claim

- Subject to sales tax.
- Exempt from sales tax as they are for use or consumption in connection with the production of HORTICULTURAL or AGRICULTURAL products as a business enterprise.
- Exempt from sales tax as they are to be used or consumed in connection with the operation of an EXEMPT institution or agency named in the space provided bellow, and that the consideration for this purchase moves from the funds of the designated institution or agency.
- Exempt from sales tax as they are used for INDUSTRIAL PROCESSING.
- Exempt from sales tax as they are for RESALE AT WHOLESALE.
- Exempt from sales tax as they are for RESALE AT RETAIL.

**If you check this box**, enter your sales tax license number here: \_\_\_\_\_

I declare, under penalty of perjury, that the information on this certificate is true, that I have consulted with the statutes, administrative rules and other sources of law applicable to my exemption, and that I have exercised reasonable care in assuring that my claim of exemption is valid under Michigan law. In the event this claim is disallowed, I accept full responsibility for the payment of tax, penalty and any accrued interest, including, if necessary, reimbursement to the vendor for tax and accrued interest.

Name of Entity: \_\_\_\_\_ Account #: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

**A Hand Written Signature Is Required.** Type In Your Info, Print Out, Sign And Date. Return this form by Mail, Fax or Email using the information below.