Al Parsch
Oil & Propane Co.
810-724-6425

5923 W. Imlay City Rd.
P.O. Box 66
Imlay City, MI 48444

Fax: 810-724-3330
www.parschoil.com

Michigan Sales and Use Tax Certificate of Exemption

TO BE RETAINED IN THE SELLER'S RECORDS – DO NOT SEND TO TREASURY.

This certificate is invalid unless all four sections are completed by the purchaser.

SECTION 1: CHECK ONE OF THE FOLLOWING

☐ One time purchase ☐ Blanket certificate **(January 1, 2008 to December 31, 2011)**

The purchaser hereby claims exemption on the purchase of tangible personal property and selected services made under this certificate from **Al Parsch Oil and Propane Co.** and certifies that this claim is based upon the purchaser's proposed use of the items or services, or the status of the purchaser.

SECTION 2: ITEMS COVERED BY THIS CERTIFICATE

☐ All items purchased
☐ Limited to the following items:_____

SECTION 3: BASIS FOR EXEMPTION CLAIM

☐ For Resale at Retail-Sales Tax Registration Number:_____
☐ For Resale at Wholesale – No Tax Number Required
☐ For Lease – Use Tax Registration Number:_____
☐ Agricultural Production____% - No Tax Number required (Describe):_____
☐ Industrial Processing_____% - No Tax Number Required_____
☐ Government Entity, Nonprofit School, Nonprofit Hospital, and Church (Circle type of organization.)
☐ Nonprofit Internal Revenue Code Section 501 © (3) and 501© (4) Exempt Organizations (Attach Copy of IRS letter ruling).
☐ Nonprofit Organizations with an Exempt letter from the State of Michigan (Attach a copy of State's letter)
☐ Multiple Points of Use (claim ONLY for electronically delivered software–purchaser assumes tax payment obligation)
☐ Direct Mail (delivered to multiple taxing jurisdictions – purchaser assumes tax payment obligation)
☐ Other (explain)_____

SECTION 4: CERTIFICATION

I declare, under penalty of perjury, that the information on this certificate is true, that I have consulted the statues, 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.

_____ _____
Purchaser Street Address

_____ _____
Area Code/Telephone No. City State Zip Code

_____ _____
Signature and Title Date Signed

_____
Name (Print or Type)