

This document is to be completed by a purchaser when claiming exemption from sales/use/excise tax. Certificates are valid for up to three years.

Purchaser legal name: TimePayment Corp

Seller legal name: _____

Doing business as: Retailer

Doing business as: _____

Address: 1600 District Avenue Suite 200

Address: _____

City: Burlington State: MA ZIP: 01803

City: _____ State: _____ ZIP: _____

General nature of business: Equipment Leasing

Phone number: (781) 345-5908

Purchaser is doing business as:

Retailer

Sales/Use/Excise Tax Permit Number (if required): 20014944

Retailer car dealer

Enter your DOT number: _____

Governmental agency (including public schools)

Wholesaler

Farmer

Lessor

Manufacturer

Nonprofit hospital

Private nonprofit educational institution

Qualifying residential care facility

Nonprofit museum

Commercial enterprise

Other

Purchaser is claiming exemption for the following reason:

Resale Leasing Processing

Qualifying farm machinery/equipment

Qualifying farm replacement parts

Qualifying manufacturing machinery/equipment

Research and development equipment

Pollution control equipment

Recycling equipment

Qualifying computer

Qualifying replacement parts/supplies (Manufacturing, Research & Development, pollution control, recycling, computer)

Qualifying computer software, specified digital products and digital services

Other _____


Direct Pay - Permit number required:

Permit: _____

Description of purchase (Include additional information if necessary):

General Equipment

I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this certificate, and, to the best of my knowledge and belief, it is true, correct, and complete.

Signature of purchaser: 

Title: Director of Tax Date: 01/06/2021

Seller: Keep this certificate in your files.

Purchaser: Keep a copy of this certificate for your records.

Do not send to the Iowa Department of Revenue.