Vermont Sales Tax Exemption Certificate
for

PURCHASES FOR RESALE, BY EXEMPT ORGANIZATIONS, AND BY DIRECT PAY PERMIT

32 V.S.A. § 9701(5); § 9743(1)-(3); § 9745

Form S-3

To be filed with the ***SELLER,*** not with the Vermont Department of Taxes.

☐ Single Purchase - Enter Purchase Price $ _____

☐ Multiple Purchase (effective for subsequent purchases.)

BUYER

Buyer's Name: Time Payment Corp		Federal ID Number: 20-0687813
Trading as		Telephone Number: 617-360-7127
Address: 200 Summit Dr. Suite 100		
City: Burlington	State: MA	ZIP Code: 01803
Buyer's Primary Business		

SELLER

Seller's Name		
Address		
City	State	ZIP Code

EXEMPTION CLAIMED

DESCRIPTION. Description of purchased articles

BASIS FOR EXEMPTION

- ☒ For resale/wholesale . . . . . Vermont Sales & Use Tax Account Number: SUT-10058778
- ☐ Purchase by 501(c)(3) organization . . . . . Vermont Account Number: _____
- ☐ Direct payment by federal or Vermont governmental unit
- ☐ Direct Pay Permit . . . . . Permit #: _____
- ☐ Purchases by 501(c)5 organization presenting fairs, field days, or festivals. . . . Events: _____
  . . . . . Dates: _____
  . . . . . Vermont Sales & Use Tax Account Number: _____
- ☐ Purchase by volunteer fire department, ambulance company, rescue squad. (Registration is not required.)

SIGNATURE

I certify that I have read and complied with the instructions provided with respect to the use of this Exemption Certificate. I further certify that the above statements are true, complete, and correct, and that no material information has been omitted.

Signature of Buyer or Authorized Agent	Title	Date
	Treasurer	9/7/23

This form may be photocopied.