

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: _____

Doing business as: _____

Address: 200 Summit Dr. Suite 100

Address: _____

City: Burlington State: MA ZIP: 01803

City: _____ State: _____ ZIP: _____

General nature of business: Leasing Equipment

Phone number: _____

Purchaser is doing business as:

- Retailer
- Permit number (if required): 2-00-149444
- 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
- Nonprofit food bank
- 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 or computer peripheral
- Qualifying replacement parts/supplies (manufacturing, research & development, pollution control, recycling, computer)
- Qualifying computer software, specified digital products and digital services
- Grain bins and replacement parts
- Other _____
- Direct pay Permit number required: _____
- Permit: _____

Description of purchase (Include additional information if necessary):

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: CFO Date: 01/02/2025

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