

CITY OF WASILLA

FINANCE DEPARTMENT

290 East Herning Avenue Wasilla Alaska 99654-7091

907-373-9088 Phone 907-373-9085 Fax

salestax@ci.wasilla.ak.us

2020 WHOLESALE/MANUFACTURER/RESALE SALES TAX EXEMPTION

FEE: \$10.00

**GOOD ON PURCHASES FOR RESALE ONLY FOR BUSINESSES LOCATED OR MAKING SALES
INSIDE THE CITY AND REGISTERED WITH A CITY BUSINESS LICENSE.**

Please print. Incomplete applications will be returned.

Business Name _____
1. Owner's Name _____
2. Owner's Name _____
Mailing Address: _____ PO Box # or Street Address _____
City _____ State _____ Zip Code _____
<u>PHYSICAL LOCATION OF BUSINESS</u>
Telephone # _____
Email _____
Address _____
<u>CONTACT PERSON/MANAGER</u> (IF DIFFERENT THAN ABOVE)
Name _____

<u>APPLICATION IS</u>
New: <input type="checkbox"/>
Renewal: <input type="checkbox"/>

<u>BUSINESS LOCATION</u>
Inside City Limits: <input type="checkbox"/>
Outside City Limits: <input type="checkbox"/>
of Wasilla Locations _____

<u>REQUIRED BUSINESS LICENSES:</u>
City of Wasilla Lic#: _____ Expires _____
State of Alaska Lic#: _____ Expires _____
Application will NOT be processed unless a copy of State of Alaska license is attached. Expiration dates must be 2020 or greater

<u>BUSINESS NAME OF SELLERS</u>
<u>Name(s) of local business(es) for purchases of products for resale or manufacture are to be listed here:</u>
_____ Seller
_____ Seller
_____ Seller

As the owner of the above named, State of Alaska Licensed resale or manufacturer business, I hereby register for a *City of Wasilla* WHOLESALE/MANUFACTURER/RESALE SALES TAX EXEMPTION as a buyer under the provisions of Wasilla Municipal Code 5.16.080.

Type of purchases to be made _____
Service or Product manufactured or re-sold _____

I, the undersigned, declare that the foregoing facts are true, that I have read and understand the statutory regulations under which this exemption is granted and I furthermore certify that the purchases made by or on behalf of the buyer named above on which no sales tax is collected are bona fide "for re-sale" or "for manufacture for resale". Granting of this exemption by the City is based on the best information available and ordinances or regulations in effect at the time of issue.

This form must be completed in full & filed each year with the required documentation attached.

Signature _____ Date _____

CERTIFICATE # WM2020-_____ EXPIRATION DATE 12/31/2020
Cash/CC/Check# _____ RECEIPT # _____
APPROVED _____ DATE _____