<u>Louisiana – Resale Request</u>

SELLER

ADVANCED BUILDING PRODUCTS
5900 S LAKE FOREST DRIVE #400
McKINNEY, TX 75070

Important - To satisfy sales tax exemption
requirements, please send the following forms back to
us:

- 1. This cover page AND
- A copy of your State issued Louisiana Resale
 Certificate (form R-1064). Please complete any
 Parish information on this form and remember
 to sign and date the form. An example of this
 form is provided.

BUYER

Sample Exemption Document

PDR	Louisiana Resale Certificate Purchases of Tanglibe Personal Property for Resale 4a: 85.47.301(f)		This is an example of the form you need to provide. Please send you State issued form with your Parish Information.		
Note: This certificate may be duplice	ated as needed. Please retai	in original certificate for	your records		
Louisiana Tax Number Your tax number	Forcials	Effective Date	Ex	Expiration Date	
Purchaser Legal Name Your company name		Purchaser Trade Name			
Maring Address	Mailin	g Address			
Your address					
City			State	Zφ	
Lecation Address	Location	on Address	CONTRACTOR OF THE PARTY OF THE	Distriction of the contra	
LISCARION ADDRESS					
City			State	Zψ	
Partsh of Principal Place of Business		Information Parish Yax Account N	and the second	Notice of the state of the stat	
Louisiana Parish sales	n Parish Information tax registration information o	at be added to your Lo	urkana state ce	rtficate	
by going to http the purchaser, partify that all material in the same form as purchased or to be	//www.revenue.louisiana.go	sections/business/res	salecertificate as	фг	
in the same form as purchased or to be hard star-exempt purchases will be ro understand that if I use anyone the subject to tax. I the purchase, assume the purchaser or agent who traudulent provided for by Tille 47 of the Louistans prenation and interned due	sold as tangible personal prop to other than for resale. I must full liability for the tax.	testy in the normal course	e of use If this p	ew product. I further centry	
AN ASSESSMENT OF STREET			1. 16 0 mm 19 0 mm 19 14 Mm 19		
Name	Autho	rization Trie			
		1.00			
CONTRACTOR		Date (mm/ad/yyyy) Sample Form			
Sgrature Sample Form		Sample Funi			

Forms by www.CertCapture.com

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