

State of New Jersey
DIVISION OF TAXATION

SALES TAX

FORM ST-13

To be completed by contractor and retained by seller.

CONTRACTOR'S NEW JERSEY TAX
REGISTRATION NUMBER*

CONTRACTOR'S EXEMPT PURCHASE CERTIFICATE

TO: BILL WHAL SUPPLY

(Name of Seller)

(Date)

5900 S LAKE FOREST DRIVE STE 400

McKINNEY TX 75070

(Address of Seller)

The materials, supplies, or services purchased by the undersigned are for exclusive use in erecting structures, or building on, or otherwise improving, altering, or repairing real property of an exempt organization, governmental entity, or qualified housing sponsor and are exempt from Sales and Use Tax under N.J.S.A. 54:32B-8.22. For purposes of this exemption, "exclusive use" means that the supplies and materials purchased will be entirely used or consumed on the job contracted for by the exempt organization, governmental entity, or qualified housing sponsor named below.

*THE EXEMPTION APPLIES AS LONG AS THE PROPERTY IS OWNED (OR LEASED) BY: (Check one)

EXEMPT ORGANIZATION

Name of Exempt Organization

Address

Exempt Organization Number

NEW JERSEY OR FEDERAL GOVERNMENTAL ENTITY

Name of Governmental Entity

Address of Governmental Entity

QUALIFIED HOUSING SPONSOR

Name of Qualified Housing Sponsor

Address of Qualified Housing Sponsor

ADDRESS OR LOCATION OF CONTRACT WORK SITE: (property must be owned or leased by one of the above)

I, the undersigned contractor, hereby verify and affirm that all of the information shown on this certificate is true.

Name of Contractor as registered with the New Jersey Division of Taxation*

Address of Contractor*

Signature of Contractor or Authorized Employee*

See INSTRUCTIONS on reverse side.

*Required

MAY BE REPRODUCED
(Front & Back Required)