



**APPLICATION FOR RESALE OF GOODS CERTIFICATE**  
**HAINES BOROUGH FINANCE DEPARTMENT, SALES TAX OFFICE**  
**BOX 1209, HAINES, AK 99827 PH: (907)766-6406 jbadger@haines.ak.us**

Businesses making local purchases for resale must obtain a Resale of Goods Certificate for the purchases to be exempt. Resale of Goods Certificates are only issued to businesses that are registered and current in remitting sales tax. Certificates will not be issued if an account is not in compliance.

Certificates are valid on a calendar year basis. Application will not be processed if information is not complete or if application fee is not submitted.

This is a NEW APPLICATION \_\_\_\_\_ RENEWAL \_\_\_\_\_ for January through December 31 \_\_\_\_\_

Business Name: \_\_\_\_\_ Sales Tax Account Number \_\_\_\_\_

D.B.A. \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Type of Business Activity: \_\_\_\_\_

RESALE CERTIFICATE FEE: \$10.00 EFFECTIVE JANUARY 1, 20 \_\_\_\_\_

APPLICANTS WILL ONLY BE ISSUED ONE RESALE CERTIFICATE.

Resale Code Selection (limit 4) Please see Resale Codes Listing.

1.	3.
2.	4.

I understand subject to Haines Borough 3.80.070 The clerk may revoke any exemption authorization, certificate or other authority to obtain an exemption if the person entitled to the exemption has been found to have used the exemption which to which the exemption holder is not entitled or has permitted another to use the exemption to which the other person is not entitled.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

FOR SALES TAX OFFICE USE ONLY	
Sales Tax Exemption Number: _____	Expiration Date: December 31, 20 _____
Method of Payment: Check: _____ Credit Card: _____ Cash: _____ Other _____	
Staff Authorization: _____	Issue Date: _____