

Georgia & Florida

Blanket Certificate of Resale

This is to certify that all material, merchandise, or goods purchased by the undersigned from

GTS Distribution after _____ is purchased for the following purpose:
(date)

(check one)

_____ Resale as tangible property.

_____ To be incorporated as a material or part of other tangible personal property to be produced for sale by manufacturing, assembling, processing or refining.

_____ To be exported for sale, use, or consumption outside the continental limits of the United States.

_____ Other _____

Type of Business Engaged in by Purchaser _____

I declare, under penalties of false swearing, that this certificate has been examined by me and to the best of my knowledge and belief is true and correct, made in good faith, pursuant to the sales and use tax laws of the State of _____.

This certificate shall be considered a part of each order which we shall hereinafter place provided such order contains our certificate number. This is to continue in force until revoked in writing.

Resale Certificate No. _____ Issue Date: _____, 20_____

Company _____ E-Mail _____

Address _____

City _____ State _____ Zip _____

Phone _____ Signature _____

Print Name _____ Title _____

****A copy of your state resale license MUST be supplied with Customer Application.**

Please complete Customer Application in order to establish a customer account.
Incomplete information may result in delay or non-processing of application.