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STATE OF MISSISSIPPI, COUNTY OF _____

BEFORE ME, the

undersigned authority, on this day personally appeared _____

(NAME)

, who after being

by me first duly sworn, on oath deposed and said:

Under the penalty of perjury,

I hereby certify that I am a farmer growing agricultural products on a commercial scale for market.

WITNESS MV SIGNATURE this the

I hereby certify that all farm tractors and farm implements that I purchase at the reduced 1.5% rate of sales tax will be used directly in the production of poultry, ratite, domesticated fish as defined in Miss. Code Ann. Section 69-7-501, livestock, livestock products, agricultural crops or ornamental plant crops or used for other agricultural use in my farming operation.

I hereby certify that parts and labor used for the maintenance or repair of farm tractors and/or farm implements purchased at the reduced 1.5% rate of sales tax will only be used on farm tractors and farm implements that qualify for the reduced 1.5% rate of sales tax as provided in Miss. Code Ann. Section 27-65-17.

I further certify and agree that if I fail to put farm tractors and/or farm implements and parts and labor used to maintain and/or repair such farm tractors or farm implements to the use set out above, I will pay to the Mississippi Department of Revenue the difference between the one and one half percent (1.5%) sales tax I am paying to the vendor on the farm tractors and/or farm implements and parts and labor used to maintain or repair such farm tractors or farm implements described herein and the seven percent (7%) retail sales tax rate, plus a fifty percent (50%) fraud penalty and the applicable rate of interest per month provided in Miss. Code Ann. § 27-65-39, from the date of purchase until this additional tax is paid to the Mississippi Department of Revenue.

I affirm that if I cease to be a farmer prior to December 31, of the current year, I will notify the dealer so that applicable sales tax rates may be charged on future purchases. THIS AFFIDAVIT WILL ONLY SUPPORT THE REDUCED 1.5% RATE OF SALES TAX THROUGH **DECEMBER 31**, ______. I understand purchases made after December 31, of the current year will require a new affidavit.

day of

		,		
(PRINTED NAME)		(SIGNA	(SIGNATURE)	
	(STRE	ET ADDRESS)		
	(MAIL)	NG ADDRESS)		
Telephone	e Numbers: Work – ()	Home – ()		
	NOTARY PUBLIC A	CKNOWLEDGEMENT		
STATE OF MISSISSIPP	PI, COUNTY OF			
Personally came and app	peared before me, the undersigned auth	ority in and for the said county and s	state, on thisday of	
, 20, within my jurisdiction, the within named			, who acknowledged	
that he/she is the	of		and that in said representative	
capacity he/she executed the	above and foregoing instrument after h	aving been duly authorized so to do		
		Printed Name:		
[Plac	e Seal Here]			
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