

CERTIFICATE FOR RESALE, PACKAGING, OTHER EXEMPTION REASONS

As the holder of the Provincial Sales Tax (PST) number below this document is provided to make exempt purchase from the seller below

PART A - BUYER

COMPANY NAME

PST NUMBER

BUYER ADDRESS *(include street or PO box, city, province or postal code)*

BUYER SIGNATURE

BUYER TITLE

DATE

PART B - SELLER

SELLER NAME

SELLER ADDRESS *(include street or PO box, city, province or postal code)*