

E-595E Streamlined Sales and Use Tax Agreement Certificate of Exemption

NCDOR
Web-Fill
6-15

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or data elements required on the form) to a state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

- 1 Check if you are attaching the Multistate Supplemental form.
- 2 If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.
- 3 Check if this certificate is for a single purchase and enter the related invoice/purchase order # _____.

3 Please print

Name of purchaser: LA MANSON

Business address: 4009 Lassiter Mill Rd #132 Raleigh

City: NC State: NC Zip code: 27609

Purchaser's tax ID number: 600941529

State of issue: NC Country of issue: NC

If no tax ID number, FEIN: 600941529/46-504285

Enter one of the following: Driver's license number/State issued ID number _____

Foreign diplomat number _____

Name of seller from whom you are purchasing, leasing, or renting _____

Seller's address _____

City _____ State _____ Zip code _____

4 Type of business. Check the number that describes your business.

<input checked="" type="checkbox"/> 10 Retail trade	<input type="checkbox"/> 11 Transportation and warehousing
<input type="checkbox"/> 09 Rental and leasing	<input type="checkbox"/> 12 Utilities
<input type="checkbox"/> 08 Real estate	<input type="checkbox"/> 13 Wholesale trade
<input type="checkbox"/> 07 Mining	<input type="checkbox"/> 14 Business services
<input type="checkbox"/> 06 Manufacturing	<input type="checkbox"/> 15 Professional services
<input type="checkbox"/> 05 Information, publishing, and communications	<input type="checkbox"/> 16 Education and health-care services
<input type="checkbox"/> 04 Finance and insurance	<input type="checkbox"/> 17 Nonprofit organization
<input type="checkbox"/> 03 Construction	<input type="checkbox"/> 18 Government
<input type="checkbox"/> 02 Agricultural, forestry, fishing, and hunting	<input type="checkbox"/> 19 Not a business
<input type="checkbox"/> 01 Accommodation and food services	<input type="checkbox"/> 20 Other (explain) _____

5 Reason for exemption. Check the letter that identifies the reason for the exemption.

<input type="checkbox"/> A Federal government (department)	<input type="checkbox"/> H Agricultural production # _____
<input type="checkbox"/> B State government (name) _____	<input type="checkbox"/> I Industrial production/manufacturing # _____
<input type="checkbox"/> C Tribal government (name) _____	<input type="checkbox"/> J Direct pay permit # _____
<input type="checkbox"/> D Foreign diplomat # _____	<input type="checkbox"/> K Direct mail # _____
<input checked="" type="checkbox"/> G Resale # <u>600941529</u>	<input type="checkbox"/> L Other (explain) _____

6 Sign here. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of authorized purchaser: [Signature]

Print name here: Marta Schneider

Title: owner

Date: 3/15/19



DEPARTMENT OF REVENUE
PO BOX 25000, RALEIGH NC 27640-0150

March 14, 2014

NOTICE NUMBER: 3954 160 140 311

ACCOUNT ID: 600941529
TAXPAYER ID: 46-5042285
TAX TYPE: SALES & USE REGISTRATION

Code Business Activity
GR Gross Receipts - Retail/Wholesale/Service/Manufacturing

CITY OF RALEIGH BUSINESS LICENSE

Account Number: 155729
05/01/2014 to 06/30/2014

THIS LICENSE CERTIFIES THAT THE TAXES FOR THE LISTED BUSINESS
ACTIVITIES HAVE BEEN PAID FOR THE BUSINESS LOCATED AT:

4209 Lassiter Mill Rd

LICENSE MUST BE POSTED. CONTACT REVENUE SERVICES
UPON OWNERSHIP, LOCATION, OR BUSINESS ACTIVITY CHANGE

LA MAISON INC

2318 Beechridge Rd
Raleigh, NC 27608

3954 160 140 311
LA MAISON, INC
4209 LASSITER MILL RD STE 132
RALEIGH NC 27609-5883

North Carolina Department of Revenue
Sales and Use Tax
Account ID: 600941529

Issued by the Secretary of Revenue

Certificate of Registration

This license should be detached and posted conspicuously at the place of business for which it was obtained.

CITY OF RALEIGH | REVENUE SERVICES - 03 | PO BOX 590 | RALEIGH, NC 27602-0590 (919) 996-3200

LA MAISON, INC
4209 LASSITER MILL RD STE 132
RALEIGH NC 27609-5883



Date Issued: March 14, 2014
County: WAKE
Business Class: 4070
City Code: 0092080
County Code: 092
License No: 002492899