



For Office Use Only:
Customer ID #: _____
Date Received: _____

## UNIFORM SALES & USE TAX CERTIFICATE

Please select the Sunless system that you use in your salon/business:

Mystic Tan     
  VersaSpa     
  Norvell

The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: Sunless, Inc. 8909 South Freeway Drive Suite 100, Macedonia, OH 44056

I certify that:

Legal Name of Firm: \_\_\_\_\_

Doing Business As (Buyer): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Description of Business: \_\_\_\_\_

is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for resale, or are components of a service to be resold, leased, or rented in the normal course of business. We are in the business of retailing or leasing (renting) the following:

Check products to be purchased for resale:

Equipment     
  Solution     
  Myxers     
  Lotions     
  Supplies     
  Parts

### STATE REGISTRATION, SELLER'S PERMIT or ID NUMBER OF PURCHASER

AK    No State Sales Tax	KS    _____	NY    State Form ST-120R required
AL <sub>2</sub> _____	KY <sub>24</sub> _____	OH <sub>25</sub> _____
AR    _____	LA    _____	OK <sub>16</sub> _____
AZ <sub>22</sub> _____	MA    _____	OR    No State Sales Tax
CA <sub>3</sub> _____	MD <sub>10</sub> _____	PA <sub>2</sub> _____
CO <sub>1</sub> _____	ME <sub>9</sub> _____	RI <sub>17</sub> _____
CT <sub>4</sub> _____	MI <sub>11</sub> _____	SC    _____
DC <sub>5</sub> _____	MN <sub>12</sub> _____	SD <sub>18</sub> _____
DE    No State Sales Tax	MO <sub>12</sub> _____	TN    _____
FL <sub>23</sub> _____	MS    _____	TX <sub>19</sub> _____
**signed FL Annual Resale Certificate must be attached	MT    No State Sales Tax	UT    _____
	NC <sub>25</sub> _____	VA    State Form ST - 10 required
GA <sub>6</sub> _____	ND    _____	VT    _____
HI <sub>1,7</sub> _____	NE <sub>14</sub> _____	WA <sub>20</sub> _____
IA    _____	NH    No State Sales Tax	WI <sub>21</sub> _____
ID    _____	NM <sub>1,15</sub> _____	WV    _____
IL <sub>1,8</sub> _____	NV    _____	WY    State Form ETS101 required
IN    State Form ST-105 required	NJ    _____	

I hereby certify that if any property or service so purchased tax-free is used or consumed by the firm as to make it subject to a Sales or Use Tax, we will pay the tax due directly to the proper taxing authority when state law so provides or informs the seller for added tax billing. This certificate shall be a part of each order, which we may hereafter give to you, unless otherwise specified and shall be valid until canceled by us in writing or revoked by the city or state. Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ Title: \_\_\_\_\_

Please list **ALL** locations (addresses) to which this certificate applies (use additional paper as needed).

This form may be emailed to [ar@sunlessinc.com](mailto:ar@sunlessinc.com) or faxed to 855-275-3664.