

**COMMONWEALTH OF VIRGINIA  
SALES AND USE TAX CERTIFICATE OF EXEMPTION**

(For us by a Virginia dealer who purchases tangible personal property for resale, or for lease or rental, or who purchases materials or containers to package tangible personal property for sale)

To: \_\_\_\_\_ Date: \_\_\_\_\_ , \_\_\_\_\_  
(Name of supplier)

\_\_\_\_\_  
(Number and street or rural route) (City, Town, or Post Office) (State) (Zip Code)

The Virginia Retail Sales and Use Tax Act provides that the Virginia Sales and use tax shall not apply to tangible personal property purchased for resale; that such tax shall not apply to tangible personal property purchased for future use by a person for taxable lease or rental as an established business or part of an established business, or incidental or germane to such business, including a simultaneous purchase and taxable leaseback. The Act provides also that such tax shall not apply to packaging materials such as containers, labels, sacks, cans, boxes, drums, or bags if the materials are marketed with a product being sold and become the property of the purchaser. This Certificate of Exemption may not be used by a using or consuming construction contractor as defined in the Regulations.

The undersigned dealer hereby certifies that all tangible personal property purchased from the above named supplier on and after this date will be purchased for the purpose indicated below, unless otherwise specified on each order, and that this Certificate shall remain in effect until revoked in writing by the Department of Taxation. (Check proper box below.)

- 1.) Tangible personal property for RESALE only.
- 2.) Tangible personal property for future use by a person for taxable LEASE OR RENTAL as an established business, or part of an established business, or incidental or germane to such business, or a simultaneous purchase and taxable leaseback.
- 3.) Packaging materials such as containers, labels, sacks, cans, boxes, drums, or bags that are marketed with a product being sold and become the property of the purchaser.

Name of Dealer \_\_\_\_\_ Certificate of Registration No. \_\_\_\_\_

Trading as \_\_\_\_\_

Address \_\_\_\_\_  
(Number and Street or Rural Route) (City, Town, or Post Office) (State) (Zip Code)

Kind of business engaged in by dealer \_\_\_\_\_

I certify that I am authorized to sign this Certificate of Exemption and that, to the best of my knowledge and belief, it is true and correct, made in good faith, pursuant to the Virginia Retail Sales and Use Tax Act.

By \_\_\_\_\_ (Signature) \_\_\_\_\_ (Title)

(If the dealer is a corporation, an officer of the corporation or other person authorized to sign on behalf of the corporation must sign; if a partnership, one partner must sign, if an unincorporated association, a member must sign; if a sole proprietorship, the proprietor must sign.)

*Information for supplier* – A supplier is required to have on file only one Certificate of Exemption properly executed by the dealer who buys tax exempt tangible personal property for the purpose indicated hereon.

MANCON

No matter the direction, mancon is always there.

APPLICATION FOR CREDIT

Customer Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Years at this address: \_\_\_\_\_ D & B Number: \_\_\_\_\_

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

Type Of Business: \_\_\_\_\_

Federal ID Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
(if Sole Proprietor)

**The following information must be provided. All information is confidential.**

TYPE OF BUSINESS:

\_\_\_ Corporation

\_\_\_ Check here if incorporated within the past  
Within the past 12 months.

\_\_\_ Limited Liability Company

\_\_\_ Partnership

\_\_\_ Limited Liability partnership  
(\_\_\_ General \_\_\_ Limited)

\_\_\_ Sole Proprietor

**If a corporation, list names and titles of offices and directors.**

Name: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If a partnership, list names and Social Security Numbers of Partners:**

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Principal Buyers:**

Name:

\_\_\_\_\_  
\_\_\_\_\_

**Reference:**

Bank Name: \_\_\_\_\_

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

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

Account Number: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**Trade References:** (Must Complete All Three)

Company: \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Company: \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Company: \_\_\_\_\_

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

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

Fax Number: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

We certify that ALL of the information provided above is true and accurate. The undersigning applies for credit from MANCON, subject to the terms and conditions set forth below, which as been read and is fully understood.

Company Name: \_\_\_\_\_

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

Name: \_\_\_\_\_

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

Signature: \_\_\_\_\_

**mancon**

**Terms and Conditions  
Credit Agreement with mancon**

**Late Payments:**

As you know from running your own business, later payments cost money. So, if for some reason payment is delayed, your shipments may be delayed. After 30 days, they may be halted. Customers with unsatisfactory payment history are subject to having their credit privileges revoked. If satisfactory payment is not arranged with our credit manager, collections agency and/or legal proceedings will begin. Any collection or attorney fees incurred will be added to the overdue balance.

**Credit Memos:**

Customers cannot take credit memos before mancon issues the credit. Checks for payments with debit memos deducted before we have issued a credit will be considered short payments and may result in a credit hold situation.

**Returned Checks:**

Returned checks are a very serious matter. All returned checks will incur a \$30.00 service charge. Service charges must be paid within 10 days.

On a check that has been returned by a bank for the first time, the account will be placed on a cashier's check or cash basis for 15 days. We can ship only on a cashier's check or cash basis until the check clears.

Any account that has more than one returned check will automatically be placed on cashier's check or cash for a minimum of 6 months. After that time, you must submit a new credit application.

Company: \_\_\_\_\_  
(Please Print)

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

**MANCON**  
1961 Diamond Springs Road  
Virginia Beach, VA 23455  
Phone Number: 757-460-0879 \*\* Fax Number: 757-460-3266