	Resale Certificate Application
Contributing to a better quality of life	La. R.S. 47:301(10)
	Mail completed application to: Louisiana Department of Revenue Special Programs Division Taxpayer Services P.O. Box 66362 Baton Rouge, LA 70896

Please complete an application for each business location.

PLEASE PRINT OR TYPE.

Legal Name				Louisiana	Sales Tax Account Number
Trade Name					
Mailing Address					
City		State	ZIP	Telephone	
Location Address					
City				State	ZIP
U.S. NAICS Code	U.S. NAICS Code Description				
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Note: U. S. NAICS Code – A United States North American Industry Classification System (NAICS) code is required on all applications. A NAICS code should be selected that most closely describes your dominant business. Your business code may be selected from the North American Industry Classification website at www.naics.com. If your business has a Federal Employer Identification Number (FEIN), a NAICS code may have been assigned and may be found on the tax return under "Business Code."

riefly describe business activity:	
escription of items to be purchased for resale:	

Authorization					
I affirm that the information given on this application is true and correct.					
Authorized Representative	Title				
Signature X	Date (mm/dd/yyyy)				