

**SALES TAX DEDUCTION FORM**

PLEASE HAVE AN OFFICER OF THE COMPANY SIGN THE AFFIDAVIT BELOW. THE AFFIDAVIT MUST BE NOTARIZED. RETURN THE COMPLETED AFFIDAVIT TO OUR OFFICE AS SOON AS POSSIBLE. YOUR FAILURE TO COMPLETE AND RETURN THIS AFFIDAVIT WILL RESULT IN YOUR LIABILITY FOR ANY SALES TAX DEDUCTIONS. THANK YOU FOR YOUR COOPERATION. All sales will summarily be charged sales tax until this form is properly filled out and received by us.

This is to certify that **BLUFF CITY MATERIALS, INC., RELIABLE ASPHALT CORPORATION, RELIABLE MATERIALS LYONS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC,** agree/s to furnish materials to the undersigned for this calendar year based upon the following conditions:

1. Upon signature by the undersigned, it is being represented that the materials purchased during this calendar year are to be used for jobs which DO NOT have a tax exempt status (i.e., charitable, religious, educational, or municipal organizations within the meaning of the Illinois Retailers' Occupation Tax) and will be charged the applicable sales tax.
2. Where said materials are to be used for jobs which DO have a tax-exempt status (as identified above), it is incumbent upon the undersigned to notify **BLUFF CITY MATERIALS, INC., RELIABLE ASPHALT CORPORATION, RELIABLE MATERIALS LYONS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC,** of this status.

Any deviation from this requirement will subject the undersigned to full responsibility for any results thereof, including payment of applicable taxes and any taxes and/or penalties resulting from an Illinois State audit which might disallow any of your jobs as having a tax -exempt status. This affidavit shall be considered a part of each order that we receive from your company.

DATED: \_\_\_\_\_

PRESIDENT/OWNER'S SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC  
My commission expires: \_\_\_\_\_

SEAL: