

## Streamlined Sales and Use Tax Agreement - New Jersey

## Certificate of Exemption

This is a multistate 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 the 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.  
 **NJ** If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.

2.  Check if this certificate is for a single purchase and enter the related invoice/purchase order # \_\_\_\_\_.

## 3. Please print

Name of purchaser West Orange Police Detective Bureau			
Business Address 60 Main St		City West Orange	State NJ
		Zip Code 07052-5404	
Purchaser's Tax ID Number 22-6002396		State of Issue New Jersey	Country of Issue US
If no Tax ID Number Enter one of the following:	FEIN	Driver's License Number/State Issued ID Number	Foreign diplomat number
		State of Issue: Number	
Name of seller from whom you are purchasing, leasing or renting Transunion Risk and Alternative Data Solutions Inc.			
Seller's address 4530 Conference Way S		City Boca Raton	State FL
		Zip code 33431-4489	

## 4. Type of business. Put a check by the number that describes your business

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

## 5. Reason for exemption. Put a check by the letter that identifies the reason for the exemption.

- |  |  |
|--|--|
| A <input type="checkbox"/> Federal government (department) _____                             | H <input type="checkbox"/> Agricultural production # _____             |
| B <input checked="" type="checkbox"/> NJ State or local government (name) West Orange Police | I <input type="checkbox"/> Industrial production/manufacturing # _____ |
| C <input type="checkbox"/> Tribal government (name) _____                                    | J <input type="checkbox"/> Direct pay permit # _____                   |
| D <input type="checkbox"/> Foreign diplomat # _____  | K <input type="checkbox"/> Direct mail # _____                         |
| E <input type="checkbox"/> Charitable organization # _____                                   | L <input type="checkbox"/> Other (explain) _____                       |
| F <input type="checkbox"/> Religious or educational organization # _____                     |  |
| G <input type="checkbox"/> Resale # _____  |  |

## 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 <i>John A DeMars</i>	Print Name Here John A DeMars	Title Det Lieutenant	Date 2017-07-06
---	----------------------------------	-------------------------	--------------------