



# Streamlined Sales Tax Certificate of Exemption

**Do not send this form to the Streamlined Sales Tax Governing Board.  
Send the completed form to the seller and keep a copy for your records.**

This is a multi-state form for use in the states listed. Not all states allow all exemptions listed on this form. The purchaser is responsible for ensuring it is eligible for the exemption in the state it is claiming the tax exemption from. Check with the state for exemption information and requirements. The purchaser is liable for any tax and interest, and possible civil and criminal penalties imposed by the state, if the purchaser is not eligible to claim this exemption.

1. ☐ Check if this certificate is for a single purchase. Enter the related invoice/purchase order # \_\_\_\_\_.

Print or type	2. A. Purchaser's name Transcontinental Gas Pipeline Company LLC				
	B. Business address PO Box 2400, MD 46		City Tulsa	State OK	Country [v] Zip code 74102
	C. Name of seller from whom you are purchasing, leasing or renting				
	D. Seller's address				

3. **Purchaser's type of business.** Check the number that best describes your business.

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

4. **Reason for exemption.** Check the letter that identifies the reason for the exemption.

- |   |  |
|---|--|
| <input type="checkbox"/> A Federal government (Department) *  | <input type="checkbox"/> H Agricultural Production *             |
| <input type="checkbox"/> B State or local government (Name) * | <input type="checkbox"/> I Industrial production/manufacturing * |
| <input type="checkbox"/> C Tribal government (Name) *         | <input checked="" type="checkbox"/> J Direct pay permit *        |
| <input type="checkbox"/> D Foreign diplomat #                 | <input type="checkbox"/> K Direct Mail *                         |
| <input type="checkbox"/> E Charitable organization *          | <input type="checkbox"/> L Other (Explain) _____                 |
| <input type="checkbox"/> F Religious organization *           | <input type="checkbox"/> M Educational Organization *            |
| <input type="checkbox"/> G Resale *                           |  |

\* see Instructions on back (page 2)

5. **Identification (ID) number:** Enter the ID number as required in the instructions for each state in which you are claiming an exemption. If claiming multiple exemption reasons, enter the letters identifying each reason as listed in Section 4 for each state.

ID number	State/Country	Reason	ID number	State/Country	Reason
AR			NV		
GA			OH		
IA			OK		
IN			RI		
KS			SD		
KY			TN		
MI			UT		
MN			VT		
NC	91		WA		
ND			WI		
NE			WV		
NJ	DP-00384		WY		

6. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of authorized purchaser Rebecca Beaird	Print name Rebecca Beaird	Title Transaction Tax Manager	Date 01/01/2025
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JAMES B. HUNT, JR.  
GOVERNOR



STATE OF NORTH CAROLINA  
DEPARTMENT OF REVENUE

P. O. BOX 25000

RALEIGH, N. C. 27640

MARK G. LYNCH  
SECRETARY

JAMES P. SENTER  
DEPUTY SECRETARY

Certificate No. 91

PURCHASER'S CERTIFICATE OF AUTHORITY TO BUY TANGIBLE  
PERSONAL PROPERTY SUBJECT TO SALES AND USE TAX  
WITHOUT PAYMENT OF TAX TO VENDOR

This certifies that Transcontinental Gas Pipe Line Corporation  
of 2800 Post Oak Blvd., Houston, Texas, has complied with the provisions of Sales and  
Use Tax Administrative Rule 2 which was issued by the Commissioner of Revenue on May 14,  
1962, and is hereby authorized to purchase taxable tangible personal property without prepayment  
of the North Carolina sales and use tax; and that the said company has assumed the responsi-  
bility under such administrative rule for the direct payment to the North Carolina Department of  
Revenue of sales and/or use tax due by it on all taxable tangible personal property purchased  
on and after May 14, 1962.

A copy of this certificate on file with any merchant will be sufficient authority for such  
merchant to sell taxable tangible personal property to Transcontinental Gas Pipe Line Corporation  
of Houston, Texas, without liability on the part of the seller for  
sales and/or use tax on such sales. If the certificate holder cancels the bond securing payment  
of such taxes, this certificate is not valid and the certificate holder shall notify vendors holding  
copies of the certificate the effective date of such cancellation.

Eric L. Loeck  
Director of Sales and Use Tax Division  
State of North Carolina

Mark G. Lynch  
Secretary of Revenue  
State of North Carolina

Corrected and Reissued

This, the 27th day of February, 19 84.

MAY BE REPRODUCED

ST-6A (9-74, R-1)

To be completed by purchaser and given to and retained by vendor. Read instructions on back of this Certificate.

The vendor must collect the tax on a sale of taxable property or services unless the purchaser gives him a properly completed exemption certificate.

# State of New Jersey

DIVISION OF TAXATION

SALES TAX

## DIRECT PAYMENT CERTIFICATE

### FORM ST-6A

DIRECT PAYMENT PERMIT NUMBER

DP- 00384

TO .....  
(Name of Vendor)

Date .....

.....  
(Address)

Check applicable box:

☐ Single Purchase Certificate

☐ Blanket Certificate

(City) ..... (State) ..... (Zip) .....

The undersigned certifies that:

- (1) He holds a valid Direct Payment Permit (number shown above) to make payment of New Jersey Sales and Use Tax directly to the Division of Taxation rather than to the vendor.
- (2) He is principally engaged in the Sale of (indicate nature of merchandise or service sold)

Interstate Natural Gas Pipeline Transmission  
.....  
.....

- (3) The tangible personal property or services being herein purchased are described as follows:  
.....  
.....

- (4) Unless this is marked above as a Single Purchase, it shall be considered part of any order given to you, and shall remain in force until revoked by notice in writing to you.

I, the undersigned purchaser, have read and complied with the instructions and rules promulgated pursuant to the New Jersey Sales and Use Tax Act with respect to the use of the Direct Payment Certificate, and it is my belief that the vendor named herein is not required to collect the sales or use tax on the transaction or transactions covered by this Certificate. The undersigned purchaser hereby swears (under the penalties for perjury and false swearing) that all of the information shown in this Certificate is true.

A VENDOR SHOULD READ AND COMPLY WITH THE INSTRUCTIONS GIVEN ON BOTH SIDES OF AN EXEMPTION CERTIFICATE.

Transcontinental Gas Pipeline Co. LLC

NAME OF PURCHASER (as registered with the Division of Taxation)

By *Rebecca Beard* Transaction Tax Manager

(Signature of owner, partner, officer of corporation, etc.) (Title)

P.O. Box 2400 Tulsa, OK 74101

.....  
(Address of Purchaser)