# Streamlined Sales Tax Governing Board, Inc.

# **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.

	A. Purchaser's name						
	Williams Compression LLC						
	B. Business address		City		State	Country	Zip code
5	PO Box 2400, MD 46		Tulsa		OK	lacksquare	74102
	C. Name of seller from whom you are purchasing, le	easing or rentir	ng				
•	D. Seller's address		City		State	Country	Zip code
Pι	urchaser's type of business. Check the numb	per that best	describes your bu	siness.			
_	Accommodation and food services	□08 Re			_	Professiona	
	2 Agriculture, forestry, fishing, hunting 3 Construction	□09 Re □10 Re	ntal and leasing				nd health-care serv
	Finance and insurance		nsportation and w	arehousing		Nonprofit or Government	
	Information, publishing and communications	□ 12 Util	ities	J	= '`	Not a busine	
	6 Manufacturing 7 Mining		olesale trade siness services			Other (expla	•
<b>_</b> 10/	wining	14 DUS	on iess sei vices		Natura	al gas compre	ession and services
	eason for exemption. Check the letter that ide			•			
	Federal government (Department) *						
В	State or local government (Name) *		_ 🔲   Industria	al productio		facturing *	
] C	Tribal government (Name) *		·	ay permit *			
_	Foreign diplomat #		_ ☐ K Direct M				
_	Charitable organization * Religious organization *			xplain)			
_	Religious organization				*		
1 G			M Education	nal Organi	zation *		
	Resale * e Instructions on back (page 2)		<u> </u> M Educatio	onal Organi	zation *		
se	Resale * e Instructions on back (page 2)	per as require		-			e claiming an 4 for each state.
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason	per as require is, enter the l Country Re	ed in the instructio etters identifying e	ns for each each reason			e claiming an 4 for each state. State/Country Re
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying e	ns for each each reason			
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying e eason ID nun	ns for each each reason			
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying e eason ID nun NV OH OK	ns for each each reason			
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying e eason ID nun NV OH OK	ns for each each reason			
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eeason ID nun NV OH OH RI SD	ns for each each reason			
se Iddex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eeason ID nun NV OH OK RI SD TN	ns for each each reason			
se Ide ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eason ID nun NV OH OK RI SD TN UT	ns for each each reason			
se ld ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eleason ID nun NV OH OK RI SD TN UT VT	ns for each each reason			
se Id ex Fig. 1. Since the second of the sec	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eason ID nun NV OH OK RI SD TN UT VT WA	ns for each each reason			
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eleason ID nun NV OH OK RI SD TN UT VT WA WI	ns for each each reason nber			
se   Id   ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying eason ID nun NV OH OK RI SD TN UT VT WA	ns for each each reason nber			
se Ide ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID number emption. If claiming multiple exemption reason		ed in the instructio etters identifying exason ID num NV OH OK RI SD TN UT VT WA WI WV 2306-3	ns for each each reason nber			
se Id ex	Resale * e Instructions on back (page 2) entification (ID) number: Enter the ID numb emption. If claiming multiple exemption reason ID number State/	Country Re	ed in the instructio etters identifying eason ID num NV OH OK RI SD TN UT VT WA WI WY 2306-3 WY	ns for each each reason nber	state in	which you ared in Section 4	



## STATE OF WEST VIRGINIA State Tax Department, Tax Account Administration Div P.O. Box 1826 Charleston, WV 25327-1826



Earl Ray Tomblin, Governor

Mark W. Matkovich, Tax Commissioner

WILLIAMS COMPRESSION, LLC PO BOX 18355 OKLAHOMA CITY OK 73154-0355 Letter Id: Issued:

L0455498048

Account #:

06/05/2015 2306-3326

#### DIRECT PAY PERMIT GENERAL INFORMATION

This Direct Pay Permit is issued to the within named taxpayer to be used for taxable or exempt purchases made from vendors as specified in the application submitted to the West Virginia State Tax Department.

The permit holder shall pay the tax for sales of taxable services, and leases of tangible personal property, from specified vendors directly to the State Tax Department. The tax will be due on or before the twentieth (20th) day of the month after the preceding month's transactions. The State Tax Department may cancel this permit and interest and penalties may apply if the holder does not file returns by the due date.

This permit shall continue to be valid until the holder surrenders the permit or the State Tax Department cancels the permit for cause.

The holder of this permit shall notify each specified vendor from whom tangible property is purchased or leased or from whom services are purchased of their direct pay permit number and that any tax thereon is being paid directly to the State Tax Department.

Upon the expiration, cancellation or surrender of the permit, the holder shall promptly notify in writing, the specified vendors from whom tangible property is purchased or leased or by whom services are rendered of such cancellation or surrender.

The State Tax Department will forward specifically printed forms for remitting this tax.

Should you need further assistance concerning this matter, contact the Taxpayer Services Division at (304) 558-3333 or toll free (800) 982-8297.

atL025 v.17

PLEASE CUT HERE

### WEST VIRGINIA STATE TAX DEPARTMENT CONSUMERS' SALES AND SERVICE TAX AND USE TAX **DIRECT PAY PERMIT NUMBER: 23063326**

Effective Date: 01-Dec-2014



Use this Direct Pay Permit for purchases made from the vendors as specified in the application to the West Virginia State Tax Department. State law prohibits use of this permit by anyone other than the named taxpayer. The vendor, on all applicable invoices, should record the permit number.

#### **BUSINESS LOCATION ADDRESS**

Account ID: 2306-3326

WILLIAMS COMPRESSION, LLC 525 CENTRAL PARK DR OKLAHOMA CITY OK 73105-1723

\*This is your Permanent Number and is in effect until you surrender your permit, or until otherwise cancelled.

You may not use this permit to purchase gasoline or special fuels.

