Glass Mosaic Canada

Please complete and return to:

686 The Queensway, Toronto, Ontario Canada M8Y 1K9

Ontario Retail Sales Tax Purchase Exemption Certificate						
Blanket:		please circle	YES	NO		
New:		please circle	YES	NO		
Customer Number:						
Business Name:						
Business Address:		Street address:				
		City:	Province:	Postal Code:		
Phone number:						
Fax number:						
Vendor Permit Number						
(if applicable):						
Nature of Business:						
Under the provisions of the Retail Sales Tax Act, the above-named business claims						
exemption from Ontario Retail Sales Tax on the following goods or taxable services:						
	_	le Goods or Taxable Services Purchased for Resale				
		nery, Equipment, and/or Processing Material Purchased for Manufacturing				
<u> </u>	Equipment, Tools, and/or Machinery used by a Person Engaged in Farming or Fishing				ing or Fishing	
	Insurance/Benefit Plan					
i	Religious, Charitable and Benevolent Organization					
l	Hospital Equipment					
i	Identity Card Type and Number					
		Other (please state exemption):				
Signature of authorized person:						
Name of authorized						
person: (Please print)						
Date of issue:						
Date of expiry:						

IMPORTANT:

The person buying the taxable goods or taxable services, or entering into a contract of insurance or benefits plan for which an exemption is claimed must complete this certificate and give it to the supplier. The supplier is to keep this form as stated in the regulations.

Every person who makes a false statement on a Purchase Exemption Certificate or misuses the certificate is liable, if convicted, to a fine of not less than \$1,000 and an amount of not more than double the amount of the tax that should have been paid, or that was evaded, or to imprisonment for a term of not more than two years or both.