New Hampshire Department of Revenue Administration



COMMUNICATIONS SERVICES TAX APPLICATION FOR RESALE

Name of Applicant					CST Registration Number						
Number & Street Address			Тахр	bayer	Identif	icatio	n Numl	ber			
Address (continued)											
City / Town	State	Zip Code +	- 4 (or C	anad	lian Pos	stal Co	ode)				
						6		_			
Provide a detailed explanation of why you believe that your purchase of communi RSA 82-A:9. (Attach additional pages, if necessary.)	ications services are	e exempt from t	the Con	nmur	nication	is Ser	vices Ta	x pursua	ant to		
Provide a listing of businesses to whom you resell communications services.											
Do you resell 100% of your purchases? Yes No											
Do you use communications services for any of your own administrative purposes	? Yes	□ No									
If you are reselling less than 100% provide an explanation of how you calculated the			nercer	ntado	ic						
in you are resenting less than roo /s provide an explanation of now you calculated a	ne resule percentag		. percer	nuge	15.						
Under penalties of perjury, I declare that I have examined this document, and to the Signature of Authorized Representative	ne best of my belief	f it is true, correc	ct and c		lete. MMDD						

Print Signatory Name & Title