



PUCT Certificate Number: 10023

CPL Retail Energy
Finance Department
P.O. Box 180
Tulsa, OK 74101-0180

TEXAS SALES AND USE TAX EXEMPTION CERTIFICATE

Name of purchaser, firm or agency:	
Service Address:	Phone (Area code & Number):
City, State, ZIP Code:	
CPL Retail Energy Account Number (if available):	
ESI-ID(s) (Required – please attach a signed separate listing, if needed):	

Please complete the applicable section below (one section only):

Section A (Predominant usage study not required for 100% nontaxable usage) Check one only:

1) Residential, Apartment, or Nursing Home (City tax may still apply to residential usage)

2) Government Entity

3) Exempt Organization

4) Exploring, producing, or transporting material extracted from earth

5) Agricultural, including dairy or poultry operations, and pumping water for farm and ranch irrigation

6) Electrical Processes: electroplating, electrolysis, cathodic protection

7) Railroad: Operation of locomotives and trains

8) Manufacturing, processing or fabricating personal property for resale other than food for immediate consumption

9) Texas Direct Pay Permit Number: _____

10) Other nontaxable use (specify exact use): _____

Section B (Predominant usage study not required; Only for use by apartment complexes or Cotton Gins)

1) Customer declares electricity is used less than 100% but more than 50% for residential purpose in an apartment complex (City tax may still apply).

2) Customer declares electricity is used less than 100% but more than 50% for processing in a cotton gin.

Section C (Predominant usage study required)

Customer declares electricity is used less than 100% but more than 50% for a nontaxable purpose and affirms that a valid and complete study was performed on Date: _____ which shows that _____% of electricity is used for the following nontaxable purpose (Check only one):

1) Manufacturing, processing, or fabricating property for resale

2) Other nontaxable use (specify exact use): _____

To claim this exemption, the seal of a registered engineer must be affixed to this document

[Affix Seal Below]

-OR-

The following must be completed by an engineer:

(Type or Print) Engineer's Name: _____ having an engineering degree from an accredited engineering college certifies the accuracy of the above-mentioned study.

Engineer's Signature: _____ Date: _____

I understand that I will be liable for payment of sales or use taxes which may become due for failure to comply with the provisions of the Tax Code: Limited Sales, Excise, and Use Tax Act; County Health Services Sales and Use Tax; The Texas Health and Safety Code: Special Provisions Relating to Hospital Districts, Emergency Services Districts, and Emergency Services Districts in counties with a population of 125,000 or less.

I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

Print Name & Title: _____

Authorized Signature*: _____ Date: _____

* If signed by Agent or other representative, Power of Attorney must be completed.

Limited Power of Attorney

I, as the authorized representative of the Customer for each of the CPL Retail Energy account number(s) and associated ESI ID(s) identified below, hereby execute this LIMITED POWER OF ATTORNEY, appointing

_____ as my Attorney-in-Fact, for the purpose of attempting to qualify my purchases of electricity used in an exempt manner for a Texas state sales tax exemption. Furthermore, I hereby authorize such appointee to receive a confirmation of a sales tax refund with respect to each such CPL Retail Energy account and associated ESI ID(s), which information may include the completion date of the sales tax refund and the amount of the related sales tax refund credit posted to each such CPL Retail Energy account. The confirmations may be communicated to the appointee's mailing address, e-mail address and/or phone number specified below, as selected by CPL Retail Energy:

Appointee's Mailing Address: _____

Appointee's Email Address: _____

Appointee's Phone Number: _____

Appointee's Fax Number: _____

Dated on this ____ day of _____, 20 ____

Print the Customer's Complete Name: _____

Name as it appears on the Account: _____

Signature of Authorized Representative of Customer: _____

Print Name of Authorized Representative: _____

Account Number (if available) _____

ESI ID(s) (required; please attach a signed separate listing if needed):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Before me on this ____ day of _____, 20 ____, appeared _____

Known to me to be the person who has subscribed his/her name to the foregoing instrument.

[Affix notary seal below]

Notary Public in and for the State of Texas