



# MAINE REVENUE SERVICES SALES, FUEL & SPECIAL TAX DIVISION EXEMPTION APPLICATION

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## INCORPORATED NONPROFIT COMMUNITY ACTION AGENCY

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Name of Corporation \_\_\_\_\_  
Name of Community Action Agency \_\_\_\_\_  
*Physical Location* \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_

**The statute reads,** Sales to community action agencies designated in accordance with Title 22, section 5324. PL 1999, c. 499, §1 (new); PL 2009, c. 204, §12 (amd).

### IN ORDER TO PROCESS THE APPLICATION THE FOLLOWING *MUST* BE INCLUDED

Copy of your letter from the Department of Health and Human Services designating the organization as a community action agency.

**Note:** All information contained on this application is subject to **VERIFICATION** by Maine Revenue Services. Maine Revenue Services may request additional information or documentation necessary to determine eligibility.

I hereby certify that \_\_\_\_\_ is an incorporated nonprofit community action agency. I therefore request that a sales/use tax exemption certificate be issued to the above organization pursuant to Title 36 MRSA 1760 (49).

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Tel: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Fed ID: \_\_\_\_\_ Title: \_\_\_\_\_

Date Facility Opened: \_\_\_\_\_

Mailing address: Maine Revenue Service, P.O. Box 1060, Augusta, ME 04332-1060

APP-133 (Rev 10/2012)