

**SALES TAX QUESTIONNAIRE**

**Please check all of the following boxes that apply to this account.**

\_\_\_ **Full-Time Residence**

\_\_\_ **Secondary Home or Cabin used by me and members of my family**

\_\_\_ **Residence also used for business (\_\_\_\_% used for business)**

\_\_\_ **Property used 100% for a business**

\_\_\_ **Rental Property (mark one)**

A. I am the tenant, and the service is in my name for residential use.

B. I have tenants in the property, and the electricity is in my name.

\_\_\_ **Special Exemptions (mark one)**

A. Religious Organization

B. Volunteer Firemen's Organization

C. Nonprofit Educational Institution

D. Charitable Organization

E. School District

F. Tourist Promotion Agency

G. Manufacturing

H. Dairying

I. Farming

J. The electric service is in my name, but this is the residence of someone else for whom I am the legal guardian, have power of attorney, or am the executor of an estate.

\_\_\_ **Other**

**Explain:** \_\_\_\_\_

**Please fill out the following information and return this form in the enclosed envelope.**

**Thank you.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number (with area code)