



Missouri Department of Revenue  
Project Exemption Certificate

This form is to be completed and given to your contractor.

Exempt Entity and Project Information	Name of Exempt Entity Issuing the Certificate City of Kansas City, Missouri		Missouri Tax Exemption Number 1   2   4   9   0   4   6   6					
	Address 5300 Municipal Ave		City Kansas City		State MO	ZIP Code 64120		
	E-mail Address eric.falk@kcmo.org							
	Project Number 89005588		Project Begin Date (MM/DD/YYYY) 1 1 / 0 1 / 2 0 1 9		Estimated Project End Date (MM/DD/YYYY) 1 1 / 0 1 / 2 0 2 0			
	Description of Project Citywide Bridge Maintenance Repair - minor bridge repair on various structures.							
	Project Location Jackson, Clay, Platte, and Cass Counties				Certificate Expiration Date (MM/DD/YYYY) 1 1 / 0 1 / 2 0 2 0			
	Provide a signed copy of this certificate, along with a copy of the exempt entity's Missouri Sales and Use Tax Exemption Letter to each contractor or subcontractor who will be purchasing tangible personal property for use in this project. It is the responsibility of the exempt entity to ensure the validity of the information on the certificate. The exempt entity must issue a new certificate if any of the information changes.							
	Signature of Authorized Exempt Entity <i>B. Eric Falk</i>		Printed Name of Authorized Exempt Entity B. Eric Falk, City of Kansas City, MO		Date (MM/DD/YYYY) 1 0 / 1 8 / 2 0 2 0			
	Contractor	The Missouri exempt entity named above hereby authorizes the purchase, without sales tax, of tangible personal property to be incorporated or consumed in the construction project identified herein and no other, pursuant to <u>Section 144.062, RSMo</u> . Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.						
		Name of Purchasing Contractor		Signature of Contractor <i>Scott Ritz</i>		Date (MM/DD/YYYY)		
Address		City		State	ZIP Code			
Subcontractor	Contractors - Present this to your supplier in order to purchase the necessary materials tax exempt. Complete the Subcontractor portion if extending the certificate to your subcontractor. The contractor must sign the form in the space provided below.							
	Name of Purchasing Subcontractor							
	Address		City		State	ZIP Code		
	Signature of Contractor <i>Scott Ritz</i>		Contractor's Printed Name Scott Ritz		Date (MM/DD/YYYY) 10 / 18 / 2019			

Form 5060 (Revised 08-2015)

Taxation Division  
P.O. Box 358  
Jefferson City, MO 65105-0358

Phone: (573) 751-2836  
Fax: (573) 522-1271  
E-mail: [salestaxexemptions@dor.mo.gov](mailto:salestaxexemptions@dor.mo.gov)

Visit <http://dor.mo.gov/business/sales/sales-use-exemptions.php> for additional information.

