

KANSAS DEPARTMENT OF REVENUE

DEALER/PURCHASER DECLARATION OF EXEMPTION FOR CERTAIN VEHICLES AND AIRCRAFT SOLD TO NONRESIDENTS FOR REMOVAL FROM KANSAS
(SEE REVERSE SIDE FOR INSTRUCTIONS)

SECTION A: DESCRIPTION OF VEHICLE OR AIRCRAFT

1. As defined in KSA 8-126 or KSA 3-201, the item sold is a: motor vehicle semitrailer pole trailer aircraft
2. Make _____ Model _____ Year _____
3. VIN number or aircraft ID number _____
4. Total purchase price \$ _____ Trade-in amount \$ _____ Taxable selling price \$ _____
5. Date of purchase and delivery _____ 6. Place of delivery to purchaser _____
7. If applicable, final delivery date of a "green aircraft" after being fitted out in Kansas _____

SECTION B: RETAILER INFORMATION AND DECLARATION (KSA 53-601)

1. Trade name of dealership _____
2. Complete address and telephone number _____

3. Sales tax registration number _____ 4. Dealer number _____
5. Name and complete address of purchaser, as shown on the documents of sale _____

I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct to the best of my knowledge.

(Signature of dealer or its authorized representative)

Date _____

SECTION C: PURCHASER'S INFORMATION AND DECLARATION (KSA 53-601)

The vehicle or aircraft described above is being purchased for removal from the state of Kansas within ten days of the date listed above in Section A, lines 5 or 7 (whichever is applicable) and will be based and registered in the State of _____ . If I am purchasing the vehicle or aircraft for personal use, I affirm that none of the indicia of bona fide residency in Kansas listed under "Requirements for Individual Purchasers" on page 2 of this form apply to me. I understand that copies of this form will be provided to officials in my home state to confirm that any taxes that are lawfully due are paid.

1. Name of purchaser _____
2. Purchaser's driver's license number, state of issuance, and listed residential address _____

I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

(Signature of purchaser or its authorized representative)

Date _____

Mail or FAX a copy to:

Kansas Department of Revenue
Audit Services Bureau
915 SW Harrison St.
Topeka, KS 66612-1588

FAX: 785-296-0531
Phone: 785-296-7108
Hearing impaired TTY: 785-296-3903

Original Copy --- Vehicle or Aircraft Dealer
Duplicate Copy --- Customer Relations-Business Tax
Triplicate Copy --- Purchaser