

E911/988 Surcharge Certificate of Resale

Customer Legal Name: _____

Customer Address: _____

Customer Contact Person: _____

Contact Person's Telephone Number: _____

Contact Person's E-mail Address: _____

_____ (the "Customer") hereby represents and warrants that it is responsible for, and will collect and remit, all applicable 911, E911, and 988 state and local regulatory surcharges (collectively "911/988 Surcharges") associated with its resale of the services provided by NuWave Communications, Inc., ("Carrier") to the Customer. Customer requests that the Carrier refrain from assessing such 911/988 Surcharges which may be applicable at a state and/or local jurisdictional level on Customer upon the Carrier's approval of the following form ("Certification") or other applicable documentation. Customer shall, at the Carrier's request, provide proof that the Carrier deems sufficient to show Customer's reseller status.

Customer certifies its ability to collect and remit all applicable 911/988 Surcharges on the following basis:

1. Check all applicable states in the table below and, for each checked state, provide the Customer's 911/988 Surcharge authorization, license or registration number for that state in the space provided and/or attach applicable local jurisdiction exemption information for each checked state, or other basis for asserting exemption from 911/988 Surcharges from each state and/or jurisdiction where Customer operates.

State	Tax ID	State	Tax ID	State	Tax ID
Alabama/AL		Kentucky/KY		North Dakota/ND	
Alaska/AK		Louisiana/LA		Ohio/OH	
Arizona/AZ		Maine/ME		Oklahoma/OK	
Arkansas/AR		Maryland/MD		Oregon/OR	
California/CA		Massachusetts/MA		Pennsylvania/PA	
Colorado/CO		Michigan/MI		Rhode Island/RI	
Connecticut/CT		Minnesota/MN		South Carolina/SC	
Delaware/DE		Mississippi/MS		South Dakota/SD	
District of Columbia/DC		Missouri/MO		Tennessee/TN	
Florida/FL		Montana/MT		Texas/TX	
Georgia/GA		Nebraska/NE		Utah/UT	
Hawaii/HI		Nevada/NV		Virginia/VA	
Idaho/ID		New Hampshire/NH		Washington/WA	
Illinois/IL		New Jersey/NJ		West Virginia/WV	
Indiana/IN		New Mexico/NM		Wisconsin/WI	
Iowa/IA		New York/NY		Wyoming/WY	
Kansas/KS		North Carolina/NC		Puerto Rico/PR	

- Customer acknowledges that the Carrier may, without Customer's permission, provide a copy of this certification to applicable governmental authorities, the Carrier's legal counsel, or the Carrier's auditors. Customer acknowledges that the Carrier may, without Customer's permission, provide a copy of this Certification pursuant to subpoena or other compulsory process, without first notifying Customer.
- Customer acknowledges that the Carrier's determination of Customer's 911/988 Surcharge exemption will be based upon the information provided by the Customer in this Certification. Customer shall indemnify and hold harmless the Carrier from any and all claims and demands arising from any information, representations or certifications made by Customer related to Customer's 911/988 Surcharge(s) exemption status in the Carrier's billing systems and processes. the Carrier shall not be liable for any Surcharge(s) not collected and/or remitted by Customer for any reason.
- If, at any time, the Customer's information, representations, or certifications made hereunder are no longer accurate, Customer must notify the Carrier within fourteen calendar days by completing and submitting a new Certification form.
- Customer's representative identified in this Certification shall be duly authorized by the Customer to make the representations and certifications contained herein on behalf of the Customer.
- This Certification incorporates the terms of all agreements the customer has with the Carrier.

BY EXECUTING THIS CERTIFICATION, CUSTOMER CERTIFIES UNDER PENALTY OF PERJURY THAT CUSTOMER FULLY MEETS THE EXEMPTION ELIGIBLE PROVISIONS ESTABLISHED BY THE APPLICABLE JURISDICION(S) AND THAT CUSTOMER WILL BE SOLELY RESPONSIBLE TO COLLECT AND REMIT ALL APPLICABLE 911/988 SURCHARGES REQUIRED BY ANY GOVERNMENTAL AUTHORITY IN THE JURISDICTIONS INCLUDED HEREIN ON ANY AND ALL SERVICES PROVIDED BY THE CARRIER THAT ARE 911/988 SURCHARGE ASSESSABLE AND ARE INCLUDED FOR BILLING PURPOSES IN THE ACCOUNT NUMBERS IDENTIFIED BELOW.

By:

Name (Print): _____

Signature: _____

Title: _____

Date: _____