

Department of Taxation and Finance

## Cigarette Stamping Agent Certification of Compliance with Tax Law Article 20

CG-213

Transaction and Transfer Tax Bureau FACCTS/Cigarette Tax

This certification covers the period	I/ through Αι	ugust 31, 2	025.			
Cigarette stamping agent identifica				in this bo	x if this is an ame	ended certification
Legal name of cigarette stamping agent				Employer identification number (EIN)		
Mailing address (number and street or PO Box)				City or town		
State or province	ZIP code	Telephone	e number <i>(include a</i>	area code)	Email address	
		-	)	,		
Certification						
I certify, in good faith and under perstamping agent purchases will be pursuant to Article 20.						
Specifically, I certify that the agent	:					
• will not resell unstamped package	ges of cigarettes in or into	New York	State, except a	as specifi	cally authorized b	oy law;
<ul> <li>will not affix stamps to packages Settlement Agreement Status, for certification period;</li> </ul>						
will not affix stamps to packages	s of cigarettes that have n	ot been ce	rtified or marke	ed as fire	safe; and	
<ul> <li>will only make tax exempt sales of New York), or to reservation of from the Tax Department.</li> </ul>						
I have listed on page 2 of this cert unstamped packages of cigarettes certification.						
Before the agent purchases unsta certification, the agent will amend other person to the Tax Department	this certification with the T	Гах Departr	ment, provide a	an update	ed list that include	es such manufacturer or
I also certify that this certification a certification remains in effect un						
Under penalty of perjury, I declare	that the statements contains a					
(proprietor, general partner, officer, etc.) certification either under the laws of induce tobacco product manufacturor into NYS. I recognize that manufacture.	of NYS or of the jurisdiction urers to sell unstamped pa	on where th ackages of	e agent reside cigarettes to th	s or is or	ganized. This cer	tification is made to
Authorized signature		Tit	tle			
Printed name						Date
State of New York	}					
	} SS.:					
County of	}					
On the day of in known to me or proved to me on the foregoing instrument and acknon the instrument, the individual(s instrument.	he basis of satisfactory evolvedged to me that they	vidence to be executed to	be the individuathe same in the	al(s) whos eir capaci	se name(s) is (are ty(ies), and that I	e) subscribed to within by their signature(s)
Notary Public			Registrati	ion numb	er	
If sworn or acknowledged outside	of NYS, see Form CG-21	3-I, Instruc	tions for Form	CG-213.		

A  Name and address of manufacturer or other person from whom the agent will purchase or otherwise acquire unstamped packages of cigarettes	<b>B</b> Manufacturer's EIN

Any agent who purchases unstamped packages of cigarettes from any person, including, but not limited to, a tobacco product manufacturer, **must** complete this certification prior to such purchase, if it is intended for resale in or into New York State (NYS). The agent **must** provide that person and the Tax Department with this certification indicating that the purchased cigarettes will **not** be resold in violation of Tax Law Article 20.

File both pages (1 and 2) of the certification with the Tax Department. Provide page 1 to each manufacturer or other person from whom you will purchase unstamped packages of cigarettes.