Alberta
FINANCE
Tax and Revenue Administration

Registration for
PRESCRIBED REBATE
OFF-ROAD PERCENTAGES (PROP)
SCHEDULE 2

Name: _____

List of Vehicles and Unlicensed Equipment used in Off-Road Operations

Provide a detailed description of your licensed vehicles used in off-road operations, plus unlicensed equipment if marked fuel is not used. If more space is required, complete additional page(s) or provide an attached spreadsheet *(for scanning purposes, all* attachments *must be letter/portrait orientation)* containing the same information as shown below.

Vehicle Category *(see schedule 1)*	**Enter Type of Vehicle** (as listed on schedule 1) **or Provide Description of "Other" or "Unlicensed Equipment"**	**Vehicle Identification Number (VIN) for licensed vehicles. Unlicensed vehicles use equipment or unit number.**
(e.g.) 6A	Utility Truck	XXXXXXXXXXXXX

See Reverse

Vehicle Category *(see schedule 1)*	**Enter Type of Vehicle** (as listed on schedule 1) **or Provide Description of "Other" or "Unlicensed Equipment"**	**Vehicle Identification Number (VIN) for licensed vehicles. Unlicensed vehicles use equipment or unit number.**