

**QUARTERLY RETURN OF FUEL OIL IMPORTED INTO THE YUKON
IN THE FUEL SYSTEM OF A VEHICLE**

Instructions

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| <p>1. Prepare forms F.O.T.C. and F.O.T. Schedule C-1 on reverse.</p> <p>2. Records must be retained for examination and include trip and distance reports and all purchase invoices.</p> <p>3. All fuel records to be reported in litres. (Note: Reefer fuel is not applicable.)</p> <p>4. Separate forms are necessary for each product: gasoline and diesel.</p> <p>5. On schedule C-1, one line must be completed for each unit that travels in the Yukon.</p> <p>6. Fuel purchased in the Yukon must be supported by an invoice and sent with the return.</p> | <p>7. The unit number or licence number must appear on the invoice.</p> <p>8. Average kilometres per litre are to be carried to ONE decimal place.</p> <p>9. Reports are to be submitted QUARTERLY.
 <i>1st quarter: due April 25</i>
 <i>January 1 to March 31</i>
 <i>2nd quarter: due July 25</i>
 <i>April 1 to June 30</i>
 <i>3rd quarter: due October 25</i>
 <i>July 1 to September 30</i>
 <i>4th quarter: due January 25</i>
 <i>October 1 to December 31</i></p> |
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Permit no. _____

Name of permit holder _____

Mailing address _____

Phone _____ Fax _____

Year _____ 1st quarter 2nd quarter 3rd quarter 4th quarter

STATEMENT OF TAX DUE

Type of fuel (use separate form for each)

DIESEL GASOLINE

Step 1	TOTAL kilometres	<input type="text" value="A"/>	km	Yukon kilometres	<input type="text" value="B"/>	km
Step 2	TOTAL purchases	<input type="text" value="C"/>	litres	Yukon purchases	<input type="text" value="D"/>	litres
Step 3	Average kilometres per litre (A ÷ C)	<input type="text"/>	km/litre			
Step 4	FUEL CONSUMED in the Yukon (Yukon kilometres ÷ Step 3)	<input type="text"/>	litres			
Step 5	Deduct YUKON PURCHASES (attach copies)	<input type="text"/>	litres			
Step 6	Deduct LITRE CREDIT from previous quarter	<input type="text"/>	litres			
Step 7	NET LITRES SUBJECT TO TAX	<input type="text"/>	litres			
Step 8	TAX RATE \$0.072 (diesel)					
Step 9	TOTAL TAX REMITTED (Step 7 x Step 8)	<input type="text" value="\$"/>		TAX PAYABLE IN CANADIAN FUNDS		

I, _____, _____ as a duly authorized
print name print title
 officer of _____
print company name
 hereby CERTIFY that the information contained in this return is true and correct to the best of my knowledge.

Signature

Date

Mail this return to: Deputy Head, Department of Finance, Government of Yukon
 Box 2703, Whitehorse, Yukon Y1A 2C6
 phone (867) 667-5345, fax (867) 393-6217

