

UNLICENSED EQUIPMENT FUEL CONSUMPTION CALCULATIONS FUEL TAX REBATE - SCHEDULE C

Tax and Revenue Administ	ration					
N			Type of fuel purchase: Check ONLY ONE box	Clear Gasolin	ne*	
Name of Applicant			per Schedule	Clear Diesel*		
For Claim period endin	g			Tax Paid Pro	pane (LPG)	
may be various models we specific consumption rate can be used or the lowes of common pieces of equipage operating hours for all pieces of hours worked for an in-depth review.	Schedule C(s) as necessary. A claiman ith different fuel consumption rates per e or similar equipment types can be grout consumption rate of that group type of pment are grouped, then column A may exes of equipment in the group. The Fuel fuel allocations and consumption rate	hour. Each puped on one lican be used. For contain several Consumed in per hour shou	iece of equipment can ine and either the weig Provide your equipment eral REF#s and column s calculated by multipl ald be retained for audi	be separately listed whited average consumate reference number in C must contain the region column C by contain the purposes or if claim	with its option rate option rate option rate option A. oumber of lumn D. option is selected	
* Claimants who have a TEFU number may use clear fuel and submit schedule C(s) only when it is impractical to use marked fu						
A Equipment REF#(s)	B Equipment Type (unlicensed only)	C Total Hours Operated	Consumption Rate per Hour (in litres)	E Fuel Consumed (in litres) C x D	TRA Use Only	
	<u> </u>					

Business Identification	Number: L L L L L L L L L L L L L L L L L L L	Period Ending:				
A Equipment REF#(s)	B Equipment Type (unlicensed only)	C Total Hours	D Consumption Rate per Hour (in litres)	Fuel Consumed (in litres) C x D	TRA Use Only	
KEF#(S)	(unilicensed only)	Operated	(in litres)	CXD	Offiny	
					1	
					<u> </u>	
					1	
					+	
					1	
					1	
					+	
					1	
					+	
					1	
					<u> </u>	
Sub-total from pag	es 1 and 2					
DEDUCT: If you ha	ve included hours worked for equipm act the number of litres of marked fue					
SIGNE TOTAL						

Year

Month Day

Carry forward the totals of all Schedule C(s) combined with the totals from all Schedule B(s) for each fuel type to the appropriate line 30, 32 or 34 on the Fuel Rebate Application (form AT342).

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