



Name of Operation/Business \_\_\_\_\_

- Hand dye the **VOLUME OF MIXED FUEL REMAINING IN THE TANK** according to the dyeing specifications available from your supplier or Tax and Revenue Administration (TRA). Dye can be obtained from your supplier or another bulk dealer. The volume of fuel to be rebranded and reported on the monthly return will not be approved if the mixed fuel has not been properly hand dyed.
- Open valves and resume sales of marked fuel.
- Please attach to your Rebrand Notification a copy of the sales receipts (invoices) or meter tickets for the product you received which was subsequently mixed.

If you are an **independent agent**, the **VOLUME OF REBRAND** must be reported on line 45 of your "Independent Bulk Agents Monthly Statement of Marked Fuel Sales", form AT372. (NOTE: If, on this form, the volume of rebrand is negative, then the volume must be recorded as a negative amount on line 45 of the AT372). The original notification and supporting documents must be attached to that form and submitted to Tax and Revenue Administration.

If you are a **commissioned agent**, send the original Rebrand Notification to your oil marketing company for submission with their monthly Generic Fuel Collector Summary form (form FTG-TAX and/or FTD-TAX) on which the adjustment is to be claimed. Commissioned agents must report the rebrand to their supplier according to the procedures of that company.  
(NOTE TO OIL MARKETING COMPANIES: If, on this form, the volume of rebrand is negative, then the volume must be recorded as a negative amount on the Litres Dyed During The Month, form AT366).

The personal information that you provide on this form and any attachments will be used for the purpose of administering the Fuel Tax Act and Regulations (RSA 2000). It is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act (RSA 2000). It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of this information you can contact Tax and Revenue Administration at the telephone numbers and address listed on page 1 of this form.

### CERTIFICATION

*I hereby certify that, as a duly authorized agent of the corporation or business described on this form, the information given on this notification is true, accurate and complete.*

Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_  
Please print

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY

Reviewed & Approved By:

Date: