

This form is only to be used when pre-registration using form AT341 has been completed and you have received approval along with your prescribed off-road percentages. One original copy of this application **must be received within 3 years from the end of the year in which the fuel purchase was made**. Submit completed applications to: **TAX AND REVENUE ADMINISTRATION, 9811 109 ST, EDMONTON AB T5K 2L5**. For more information call Tax and Revenue Administration at (780)427-3044. If calling long distance within Alberta, call 310-0000 then enter (780)427-3044. Fax (780)427-0348. Additional forms, instruction sheet and information circulars may be obtained from our Internet site at [www.finance.gov.ab.ca](http://www.finance.gov.ab.ca) or requested from our office using the phone number or address given above.

<p>1. Business Identification Number <i>(number assigned by Tax and Revenue Administration)</i></p> <p>2. Legal Name of Corporation, Partnership or Individual <i>(surname/first name)</i></p> <p>3. Business or Operating Name <i>(if different from legal name)</i></p> <p>4. New Mailing Address <i>(specify only if changed since last claim)</i></p> <hr style="border-top: 1px dashed black;"/> <p>City/Town _____ Prov. _____ Postal Code _____</p>	<p>6. For Office Use Only <span style="float: right; border: 1px solid black; padding: 2px;"><b>28</b></span></p> <hr/> <p>Claim Period <i>(must be a calendar quarter):</i></p> <p align="center">YYYY      MM      DD</p> <p>7. Period Start _____</p> <p>8. Period End _____</p> <p>9. Is this an amended claim?  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p><small>If "Yes", please note that amended claims must be completed separately from new claims. Amended and new claims cannot be combined on the same forms.</small></p>
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**Tax Paid Clear Fuel Available for PROP Rebate:**

<i>(In Litres)</i>	<b>Diesel</b> <i>(Includes frac fluid)</i>	<b>Gasoline</b>	<b>Propane</b>
Total Clear Fuel Purchased during claim period:	15 ■	16 ■	17 ■
<i>(plus)</i> * Fuel Assigned:	18 ■	19 ■	20 ■
<i>(less)</i> ** Fuel Resold:	21 ■	22 ■	23 ■
<i>(less)</i> Fuel Claimed via TEFU:	24 ■	25 ■	26 ■
<i>(+ /-)</i> AB IFTA Adjustment: <small><i>(from IFTA Fuel Type Schedule -AT2060)</i></small>	27 ■	28 ■	29 ■
<b>Net Fuel Available for PROP:</b>	<b>30</b> ■	<b>31</b> ■	<b>32</b> ■

**Note: For audit purposes, fuel must be tracked to each vehicle by categories, differentiating between PROP and TEFU activities.** If you have off-road vehicles/activities that do not qualify for PROP and you want to claim a rebate of fuel tax, those fuel purchases must be reported separately under the TEFU program, Schedule A.

\* Total fuel purchased in the name of another person or company for which you have an agreement in place to make the claim under PROP. See Information Circular TEFU-2, Appendix A.

\*\* Total fuel purchased and resold to other parties who might claim a tax rebate on that fuel.

The personal information that you provide on this form 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 above.

**CLEAR DIESEL (Includes frac fluid)**

■40 Category/ Type of Operation <i>(eg. 6A, 7C)</i>	■41 Total # of Vehicles per category(used in period)	■42 Prescribed Off-Road Percentages	■43 <i>Round to the nearest whole litre</i> Total Litres Consumed in Eligible Off-Road Vehicles	■44 Fuel Tax Rate	■45 Fuel Tax Rebate Amount <i>(Col 42 X Col 43 X Col 44)</i>
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	

■46 Total Clear Diesel Claimed: \$

**CLEAR GASOLINE**

■50 Category/ Type of Operation <i>(eg. 6A, 7C)</i>	■51 Total # of Vehicles per category(used in period)	■52 Prescribed Off-Road Percentages	■53 <i>Round to the nearest whole litre</i> Total Litres Consumed in Eligible Off-Road Vehicles	■54 Fuel Tax Rate	■55 Fuel Tax Rebate Amount <i>(Col 52 X Col 53 X Col 54)</i>
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	
		% X	00 X	\$0.09 =	

■56 Total Clear Gasoline Claimed: \$

**TAX PAID PROPANE**

■60 Category/ Type of Operation <i>(eg. 6A, 7C)</i>	■61 Total # of Vehicles per category(used in period)	■62 Prescribed Off-Road Percentages	■63 <i>Round to the nearest whole litre</i> Total Litres Consumed in Eligible Off-Road Vehicles	■64 Fuel Tax Rate	■65 Fuel Tax Rebate Amount <i>(Col 62 X Col 63 X Col 64)</i>
		% X	00 X	\$0.065 =	
		% X	00 X	\$0.065 =	
		% X	00 X	\$0.065 =	
		% X	00 X	\$0.065 =	

■66 Total Tax Paid Propane Claimed: \$

■70 TOTAL AMOUNT CLAIMED: \$

*(Line 46 + Line 56 + Line 66)*

**CERTIFICATION**

I hereby certify that, to the best of my knowledge and belief, the information contained in this application is true, correct and complete and that the fuel herein reported was consumed in eligible operations in Alberta as defined in section 7 of the Fuel Tax Act.

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_ Fax Number: ( ) \_\_\_\_\_

This application must be signed by the applicant or an authorized signing officer of the company.