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REFUND CLAIM ON EXPORTED TOBACCO PRODUCTS UNDER THE EXCISE ACT 2001

- To complete this form see the instructions for completion
- Please print

Send this form to: ▶

Other Levies Unit
Summerside Tax Centre
Suite 101, 275 Pope Road,
Summerside PE CANADA C1N 6E7

Have you previously filed a refund claim on tobacco products exported? Yes No

A — IDENTIFICATION

| | | | |
|--|-----------------|--|-----------------|
| Excise duty account number | Business number | Language preference <input type="checkbox"/> French <input type="checkbox"/> English | |
| BATAF number/Tobacco products commercial permit number | | Expiry date ▶ YYYY MM DD | |
| Company name | | | |
| Mailing address | | | |
| | | | |
| City | Province/State | Country | Postal/Zip code |
| Contact name | | Telephone number | |

B — DETAILS OF IMPORTATION

| | | |
|------------------------------|-----------------------------|---|
| Manufacturer's export number | Date of export ▶ YYYY MM DD | Bill of Lading/Air/Sea/Land Way Bill Number |
| Name of exporter | | |
| Mailing address | | |
| | | |
| City | Province | Postal code |

C — DETAILS OF APPLICATION

D — THIRD PARTY AUTHORIZATION

| | |
|---|--|
| <p>Complete details of application, on reverse side</p> <p>Total refund claimed Cigarettes (1) \$ 49580</p> <p>Total refund claimed Tobacco sticks (2) \$ 49581</p> <p>Total refund claimed Manufactured tobacco (3) \$ 49582</p> <p>Grand total refund claimed \$ _____</p> <p>Currency <input type="checkbox"/> US <input type="checkbox"/> Other (specify) _____</p> | <p>Complete this section if cheque is to be mailed to a person or firm other than the claimant.</p> <p>Third party's name _____</p> <p>Mailing address _____</p> <p>City _____ Province/State _____</p> <p>Country _____ Postal/Zip code _____</p> <p>Contact name _____</p> <p>Telephone number ▶ _____</p> |
|---|--|

E — Certification

It is hereby certified that:

- the amount claimed or any part of it has not been claimed before;
- all relevant books, records, and invoices are available for inspection;
- the information contained in this claim is true, correct, and complete in every respect;

"In consideration of a refund of Canadian export duty from the Canada Revenue Agency (CRA) of an amount equal to the special excise duty that was paid on the tobacco products described in Customs Form for entry number _____ . Further, I authorize the CRA to obtain any excise duty return information or customs information, necessary for the administration of the refund payment by the Canadian Government, including confirmation that the special excise duty on the said tobacco products were paid and the quantum thereof. I certify that I have authority to execute this consent to exchange excise duty and customs information."

Name (print) Title Telephone number

Signature of claimant Date

E — Certification (continued)

Cheque payable in Canadian dollars US dollars Offset to Government of Canada

Account number _____

Note: Only taxes/duties paid in the USA can be refunded in US dollars

DETAILS OF APPLICATION

| | | | | | |
|--------------------------------------|--|--------------------|-----------------------|-----------------------------|----|
| Transaction number 1 | Customs entry number | Customs entry date | YYYY | MM | DD |
| | | | | | |
| | | Cigarettes | Tobacco sticks | Manufactured tobacco | |
| Total number of cigarettes | | | | | |
| Total number of tobacco sticks | | | | | |
| Total weight of manufactured tobacco | <input type="checkbox"/> lb. <input type="checkbox"/> kg. | | | | |
| Excise tax/duty paid outside Canada | (1) | (2) | (3) | | |

| | | | | | |
|--------------------------------------|--|--------------------|-----------------------|-----------------------------|----|
| Transaction number 2 | Customs entry number | Customs entry date | YYYY | MM | DD |
| | | | | | |
| | | Cigarettes | Tobacco sticks | Manufactured tobacco | |
| Total number of cigarettes | | | | | |
| Total number of tobacco sticks | | | | | |
| Total weight of manufactured tobacco | <input type="checkbox"/> lb. <input type="checkbox"/> kg. | | | | |
| Excise tax/duty paid outside Canada | (1) | (2) | (3) | | |

| | | | | | |
|--------------------------------------|--|--------------------|-----------------------|-----------------------------|----|
| Transaction number 3 | Customs entry number | Customs entry date | YYYY | MM | DD |
| | | | | | |
| | | Cigarettes | Tobacco sticks | Manufactured tobacco | |
| Total number of cigarettes | | | | | |
| Total number of tobacco sticks | | | | | |
| Total weight of manufactured tobacco | <input type="checkbox"/> lb. <input type="checkbox"/> kg. | | | | |
| Excise tax/duty paid outside Canada | (1) | (2) | (3) | | |

If you have more than 3 transactions, a supplementary form in the above displayed format may be used to list the remaining details.

INSTRUCTIONS FOR COMPLETION
of the
REFUND CLAIM ON EXPORTED TOBACCO PRODUCTS

The following documents must be attached to your completed refund claim:

- A copy of all Customs Forms related to your refund claim,
- A copy of the Tobacco Products Export form (E60) supplied by the exporter.

NOTE: Only one Tobacco Products Export Form (E60) per Refund Claim on Tobacco Products Exported (E681) will be accepted.

- If this is your first refund claim on exported tobacco products (E681), you have to provide us with a copy of your BATF certificate or Tobacco products commercial permit related to the tobacco products. Also, if the information on the certificate has been changed, a new copy of your certificate/permit will be required.

Eligibility period: A refund claim on exported tobacco products must be filed within two years (2) from the date of export to the foreign country.

NOTE: A refund claim on exported tobacco products without a signature will be automatically rejected.

If you need more information, please contact the Summerside Tax Centre at 1-877-432-5472 (for Canada and United States) or 1-902-432-5472 (for all other countries).

| A — Identification | |
|--|--|
| Account number: | If you have previously filed a refund claim on exported tobacco products, please use the number that was assigned to you previously. If this is your first refund claim on exported tobacco products, please leave it blank, a number will be assigned automatically. |
| Business Number: | If you have a business number issued by Canada Revenue Agency, enter it in this area. |
| Language: | Check the applicable box. |
| BATF number: (For US use only) Tobacco Products Commercial Permit Number: (For countries other than US) | Please enter your Bureau of Alcohol, Tobacco and Firearms (BATF) number in this area. Enter your commercial permit number related to the tobacco products. This number is mandatory. If you do not provide this number, the process of your refund claim on exported tobacco products may be affected (i.e. longer delay) |
| Expiry date: | Please enter the expiry date of your BATF number or your Tobacco products commercial permit number. |
| Company name and mailing address: | Enter the legal name and the complete mailing address of the company requesting a refund on exported tobacco products. |
| Contact name and phone number: | Enter the name of the authorized representative who may be contacted for further information, if required. Also, enter the telephone number of the above mentioned representative. |

| B — Details of importation | |
|---|---|
| Manufacturer's export number: | Enter the number of the tobacco products export form (E60). |
| Date of export: | Enter the date of export (Date the Excise Officer signed the tobacco products export form (E60)). |
| Bill of Lading/Air/Sea/Land Way Bill Number | Enter the applicable Bill of Lading or Way Bill Number. |
| Name and address of exporter: | Enter the legal name and the mailing address of the exporter. |

| C — Details of application | |
|--|---|
| You must complete the table of each transaction identified on your Customs form on the reverse side of this application. If you have more than three (3) transactions, please attach a supplementary form. | |
| Customs entry number: | Enter the entry number from the Customs form. |
| Customs entry date: | Enter the entry date from the Customs form. |
| Total number of cigarettes: | Enter the total number of units for cigarettes. |
| Total number of tobacco sticks: | Enter the total number of units for tobacco sticks. |
| Total weight of manufactured tobacco: | Enter the total weight of manufactured tobacco. Please check the applicable box to identify the unit of measure used. |
| Excise tax/duty paid outside Canada: | Enter the total amount of Federal Excise tax/duty paid for (1) Cigarettes, (2) Tobacco sticks, (3) Manufactured tobacco. This amount becomes the "Total refund claimed" on Part C "Details of application". |
| Grand total refund claimed: | Enter the total amount of the refund claimed on tobacco products exported in this area. |
| Currency: | Please check the applicable box. |

| D — Third party authorization | |
|---|---|
| Third party's name and mailing address: Contact name: Phone number: | Enter the name and the complete mailing address to whom you would like the correspondence, including the refund cheque, if applicable, to be forwarded. You must provide written authorization to Canada Revenue Agency for the disclosure of confidential information to a third party related to your claim of exported tobacco products. This authorization must include the period for which this authorization is given. |

| E — Certification | |
|--|---|
| Name of authorized representative: Title of authorized representative: Phone number: | Please print the name, title and telephone number of the authorized representative. |
| Signature of claimant and date: | The authorized representative must sign this application. |

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|--------------------|---|
| Cheque payable in: | Please check the applicable box. Note: Only the exportation in the USA will be paid in US dollars, if applicable. |
|--------------------|---|