

APPLICATION FOR A PARTNERSHIP'S FILER IDENTIFICATION NUMBER

- Use this form to apply for a partnership's filer identification number.
- We assign each partnership a unique filer identification number—a partnership can have only **one** filer identification number. If you change the name of the partnership, you should still use the original filer identification number.
- See our income tax guide called T4068, Guide for the Partnership Information Return, for the list of codes you have to show in Section B in the area for "Jurisdictions where partnership operates." Appendix A has the codes for Canadian provinces and territories, and Appendix B has the codes for countries.
 You can get this guide on our Web site at www.cra.gc.ca/formspubs, or by calling 1-800-959-2221.
- Provide all the information we ask for, and send the completed form to:

Data Assessment and Evaluation Programs Division Ottawa Technology Centre 875 Heron Road Ottawa ON K1A 1A2

About three weeks after you send us your completed application form, we will send a
letter to the address on the form notifying you of the partnership's filer identification
number. Use that number when you file your Partnership Information Return.

Do not use this area						
Partnership's filer identification number						

-Section A - Identif	fication ————————————————————————————————————	onth Day	Year Montl	h Day	$_{ \Gamma}$ Section B – Additional information $\overline{}$
Fiscal period	From:	To:	I I I I I	I Day	
					Partnership's principal business activity: (✓)
Business Number					Professional Business Rental business
Partnership's name (please	print)				Commission Farming Fishing
Core of					Other Specify:
Care of					
Head office address					Jurisdictions where partnership operates:
City					
		Province or territo	ry Postal code		
Country	State	U.S. zip code			Is this, or will this be, a publicly traded partnership? (<)
Is this a limited partnershi	n?	(✓)	No 1 Ye	es 2	No 1 Yes 2
If yes, give the full name and address of the principal general partner.					Is this partnership a tax shelter? (✓)
Name					No 1 Yes 2
Address					If yes, enter the tax shelter identification number
					TS
City		Province or territo	ry Postal code		
					Language for correspondence (✓)
Country	State	U.S. zip code			English 1 French 2
- Section C					
Person to contact for more i	nformation (please print)				
First name		Last name ————			Area code —— Telephone number ——