



APPLICATION FOR REFUND OF SOCIAL SERVICE TAX

pursuant to the Social Service Tax Act and Nisga'a Nation Taxation Agreement

INSTRUCTIONS:

- A refund must be claimed within six years of payment of the tax.
A claim cannot be processed if the required documents/information are not supplied.
Make a copy of this Application for Refund and any attachments for your records.
Please complete Parts A, B, C and D.
See page 2 for schedule and other information.
If you require additional information, call the Consumer Taxation Branch information line in Vancouver at 604 660-4524 or contact your nearest Consumer Taxation Branch office.
Consumer Taxation Branch information and bulletins are available on the Internet: www.sbr.gov.bc.ca/ctb
Please type or print clearly.

Mail this form and all required documents to: Ministry of Small Business and Revenue Consumer Taxation Branch PO Box 9628 Stn Prov Govt Victoria BC V8W 9N6

Freedom of Information and Protection of Privacy Act (FOIPPA) The personal information on this form is collected for the purpose of administering the Social Service Tax Act under the authority of both this Act and section 26 of the FOIPPA.

CLAIMANT INFORMATION

LEGAL NAME OF NISGA'A GOVERNMENT BODY

PART A

MAILING ADDRESS CITY PROVINCE POSTAL CODE

PHONE NO. FAX NO. () ()

TYPE OF NISGA'A GOVERNMENT BODY - Please check (✓) one and provide details

NISGA'A LISIMS GOVERNMENT OTHER NISGA'A BODY (EG, TRUST) NISGA'A VILLAGE ELIGIBLE NISGA'A CORPORATION

PART B

REFUND AMOUNT

I am applying for a refund of tax in the amount of: \$

Note:

A refund can only be paid to the person who actually paid the tax. Therefore, please submit a separate form for each Nisga'a government body. No refund will be made to 3rd parties acting on behalf of the claimant.

CLAIMANT DECLARATION

PART C

By signing below, I certify that our Nisga'a government body qualifies for a refund of social service tax paid on the tangible personal property and services listed on the reverse of this application, or attached as part of this application, as provided by the Nisga'a Nation Taxation Agreement and that the following criteria have been met.

- 1. The property or service was not acquired for consumption or use in the course of a business or other activity for profit or gain.
2. Substantially all of the property or service was consumed or used in respect of performing a function of government, within Nisga'a lands, under the Nisga'a Treaty or a subsequent agreement between Canada and British Columbia, together or separately, and the Nisga'a Nation.

Additionally, I understand that if goods on which a refund has been paid are subsequently used for a purpose that is not eligible for the refund (i.e., a business purpose), tax will apply to the depreciated value of that property at the time it is converted to a taxable use.

I declare that all information provided on this form and on the attached documents is true and correct to the best of my knowledge and belief. I acknowledge that any false information may result in prosecution, a fine up to \$10,000, and/or imprisonment for up to two years.

CLAIMANT NAME - Please type or print ORGANIZATION POSITION / TITLE SIGNATURE DATE SIGNED YYYY MM DD

DETAILED REFUND INFORMATION

In support of your application, you must provide the following information.

- A list (if the claim contains more than one invoice or receipt) of all items purchased/leased, the names of the seller/lessor, the date of the purchase, and the amount of tax paid. Please use the schedule below.
- Copies of bills of sale, invoices, or receipts showing the names and addresses of the seller/lessor, the date of purchase, and the tax paid.
- Any other documents to support your application.

DATE OF PURCHASE YYYY / MM / DD	INVOICE NO.	ITEMS PURCHASED OR LEASED	NAME OF SELLER OR LESSOR	AMOUNT OF TAX PAID	FOR OFFICE USE ONLY

P
A
R
T
D