

Mailing Address: PO Box 9628 Stn Prov Govt Victoria BC V8W 9N6

APPLICATION FOR REFUND OF SOCIAL SERVICE TAX PAID BY A BONA FIDE FARMER, COMMERCIAL FISHER, OR AQUACULTURIST

under the Social Service Tax Act

INSTRUCTIONS:

- Farmers, commercial fishers and aquaculturists complete
 this form to apply for a refund of social service tax paid on
 tax exempt items. To apply for a refund of social service tax
 paid on a motor vehicle, complete form FIN 413/MV.
 Complete form FIN 413 to apply for all other social service
 tax and hotel room tax refunds.
- A refund can only be claimed within six years of the payment of the tax.
- A claim will not 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, and C, type or print clearly, and submit all required documents.
- If you require additional information, call the Consumer Taxation Branch information line in Vancouver at 604 660-4524 or contact your pearest Consumer Taxation

Branch office. Phone numbers for these offices are in the blue pages of your local telephone directory.

Request Bulletin SST 023 "Bona Fide Farmers";
 Bulletin SST 025 "Bona Fide Commercial Fishers"; or
 Bulletin SST 050 "Bona Fide Aquaculturists", for more information.

Bulletins are also available on the Internet: www.sbr.gov.bc.ca/ctb

See page 2 for other information.

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. Questions about the collection or use of this information can be directed to the Information and Privacy Analyst, FOI Section, Ministry of Small Business and Revenue, PO Box 9432 Stn Prov Govt, Victoria, BC V8W 9N6. (Telephone: Victoria at 250 953-3671,

Vancouver at 604 660-2421 or toll-free at 1 800 663-7867 and ask to be re-directed.) Email: FOI.QRYS@gov.bc.ca

60	604 660-4524 or contact your nearest Consumer Taxation								
P	CLAIMANT INFORMATION NAME OF CLAIMANT – legal name of an individual, partner(s), corporation or society (not a business or trade name)							ACCOUNT NO If registered vendor / operator	
A	MAILING ADDRESS	NGADDRESS				HONE NO.		WORK PHONE NO.	
R								()	
Т					(,			
	CITY	PROVINCE						O. – If secure to receive tax I information unattended	
Α							()	
	DEFINE INFORMATION							·	
	REFUND INFORMATION Note: A refund can only be paid to the person who actually paid the tax. No								
I am applying for a refund of tax in the amount of: refund of tax in the amount of: refund will be made to 3rd parties acting on behalf of the claima amount of provincial social service tax you are applying for. Do federal Goods and Services Tax (GST) on this application.									
	Select ONE statement below that explains why you are claiming a refund. Your claim will not be processed								
Р	if you do not provide the required documents. (See reverse for explanation of document numbers.)								
A R T	I am a bona fide farmer in BC, and I have purchased/leased and paid tax on items specifically exempt from tax under the Act, when purchased/leased by a bona fide farmer to be used solely for a farm purpose. Document No.'s 1, 6, 7, and 8 are attached.								
В	I am a bona fide commercial fisher in BC, and I have purchased/leased and paid tax on items specifically exempt from tax under the Act, when purchased/leased by a bona fide commercial fisher for use in fishing. Document No.'s 2, 3, 6, 7 and 9 are attached.								
	I am a bona fide aquaculturist in BC, and I have purchased/leased and paid tax on items specifically exempt from tax under the Act, when purchased/leased by a bona fide aquaculturist to be used solely for an aquaculture purpose. Document No.'s 4, 5, 6, 7, and 10 are attached.								
Р	CLAIMANT DECLARATION								
AR	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.								
Т	NAME - Please type or print	TITLE - If signing for	a corporation or society	SIGNAT	URE		DA	TESIGNED	
С								YYYY / MM / DD	
0									

IMPORTANT INFORMATION

Part B - Refund Information

Explanation of document numbers:

Document No.

- 1 Copies of BRITISH COLUMBIA PROPERTY
 ASSESSMENT NOTICES showing you own or lease land classified as farm land.
- 2 A copy of your **COMMERCIAL FISHER'S LICENCE** for the 12 month period following the date of your purchase.
- 3 T4F, FISH SLIPS/INCOME STATEMENTS from your employer for the 12 month period following the date of your purchase.
- 4 A copy of the **CERTIFICATION** as a bona fide aquaculturist issued by the Director, Aquaculture and Commercial Fisheries Branch.
- 5 A copy of your **AQUACULTURE LICENCE**.
- 6 A schedule listing, in date order, all items purchased or leased, and the amount of tax paid on the items.
- 7 Copies of INVOICES/RECEIPTS showing the names of the seller/lessor, the purchaser/lessee, the date of the sale, and the tax paid.
- 8 A SIGNED STATEMENT from you certifying that the items purchased or leased are to be used solely for a farm purpose.
- 9 A SIGNED STATEMENT from you certifying that the items purchased or leased are to be used solely for a commercial fishing purpose.
- 10 A SIGNED STATEMENT from you certifying that the items purchased or leased are to be used solely for an aquaculture purpose.

Part C - Claimant Declaration

- The application form must be signed by the person who paid the tax. If the tax was paid by a corporation or society, the application must be signed by an authorized officer.
- If the applicant is a corporation or society, the "I" in the Declaration Statement refers to the corporation or society.

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

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