



FUEL TAX

APPLICANT
INFORMATION

Business Name	Plant Location		
Owner or Agent Name	Contact Person		
Address	Phone Number	Fax Number	
	Postal Code	Date Filed	

REPORTING

- The accidental blending must be reported to Saskatchewan Finance, Revenue Division by phone or fax within 24 hours of the accident. This report must be filed within 14 days of the accident.
- The dye content of the blended fuel must be raised to 14 p.p.m. when marked diesel fuel is accidentally blended with clear diesel fuel and the blended fuel will be sold as marked diesel fuel.
- Documented proof (supplier product receipt and carrier transportation documents) of contaminated product returned to a refinery or terminal must accompany this report.
- Please complete all sections of this form. Forms with incomplete information will be returned.

PHONED OR
FAXED
REPORT

The accident was reported to:
Revenue Division on: _____, 20____ at ____ : ____ ☐ a.m. ☐ p.m. by _____
(phone or fax)

Please describe how the accident occurred:

DETAILS OF
ACCIDENT

Please describe corrective actions taken to ensure that accidents of this nature do not occur in the future:

CORRECTIVE
ACTION

INVENTORY

1	Product description of fuel in contaminated tank <i>before accident</i> (i.e. clear diesel fuel)	Product Name	
2	(i) Last physical inventory of tank taken before accident. (ii) Invoice number of last sale made prior to (i).	Date Time Invoice Number	Inventory in Litres
3	Plus: Fuel shipments received and placed in the tank between <i>the date reported in Section 2</i> and <i>the date of the first physical inventory taken after the accident</i> .	Number of litres of the product described in section 1 that was added to the tank during the period. Number of litres of the product added that caused the contamination.	Litres Litres
4	Less: Sales made from the contaminated tank between <i>the date reported in Section 2</i> and <i>the date the first physical inventory was taken after the accident</i> .	Number of litres of the product sold from the tank before the accident. Number of litres of contaminated product sold.	Litres Litres
5	Equals: Calculated fuel in the tank.		Litres
6	Actual physical inventory on hand on the <i>date and time the first physical inventory was taken after the accident</i> (total contaminated product).	Date Time	Litres
7	Equals: Product Variance		

TAX CREDIT

Products Mixed	Litres	Tax Rate	Tax Credits (Litres*Tax Rate)
Description of the product in the tank at the time of the accident (i.e. clear diesel fuel)			\$
Description of the product that was added to the tank causing the contamination. (i.e. marked diesel fuel)			\$
Tax paid on contaminated product			
Less: Tax collected on the sale of contaminated or accidentally mixed fuel			
NET FUEL TAX CREDIT REQUESTED			\$

Declaration:

I certify that the information provided on this report is complete and true and that no tampering has taken place and that no financial gain was intended or in fact realized.

Person responsible for accidental blend:
Print Name: _____
Signature: _____

Plant manager or other witness:
Print Name: _____
Signature: _____