

Tax Court of Canada

Please Print in Ink



Notice of Appeal – Informal Procedure

Type of Appeal

Income Tax Act

Excise Tax Act (GST)

Taxation Year(s) or Assessment Number(s)

(For an Excise Tax (GST) appeal, indicate the period of assessment and the assessment number)

Date of Reassessment, Confirmation or Decision from the

Canada Customs and Revenue Agency (Please attach copy if available)

Name and Address of Appellant

Mr.

Mrs.

Ms.

Miss

Full name of Individual or Company Name

Address

City

Province

Postal Code

TCC USE ONLY

Appeal no.:

() I

Telephone number(s):

Home: () -

Work: () -

Fax: () -

Internet (if applicable):

If You Are Not Representing Yourself, Please Complete the Following

Name of Representative

Name of Firm

Address

City

Province

Postal Code

Type of Representation

Lawyer _____

Accountant _____

Other, please specify: _____

Telephone Number(s)

Work: () -

Other: () -

Fax: () -

Internet: _____

Do not forget to include your \$100 filing fee

