



Third Party Authorization and Cancellation of Authorization for GST/HST Rebates

Use this form to authorize or cancel the authority of a person to represent you as a claimant for GST/HST rebates you claimed on Form GST189, *GST/HST General Rebate Application* and Form GST498, *GST/HST Rebate Application for Foreign Representatives, Diplomatic Missions, Consular Posts, International Organizations, or Visiting Forces Units*.

A – Claimant Identification - Complete this section for both authorizing and cancelling third party representatives.		
Are you registered for GST/HST? <input type="checkbox"/> Yes <input type="checkbox"/> No	Account/Business Number (if applicable)	
Claimant's last name or legal name of organization (include trading name if applicable)		
Claimant's first name and initials (individuals only)		
Claimant's mailing address		
City	Province/State	
Country	Postal code/Zip code	Telephone ()
Contact person	Title	Telephone ()
B – Third Party Representative Identification - Complete this section for both authorizing and cancelling third party representatives.		
Third party representative's name (include trading name if applicable)		
Third party representative's mailing address		
City	Province/State	Postal code/Zip code
Contact person	Title	Telephone ()
C – Period of Authorization - Complete this section when you authorize a third party representative.		
Please indicate the period for which this authorization applies:		
<input type="checkbox"/> One transaction – please specify _____		
<input type="checkbox"/> Specified period – from _____ to _____		
<input type="checkbox"/> Starting on _____ until revoked.		
<input type="checkbox"/> Other – please specify _____		
D – Extent of Authorization - Complete this section when you authorize a third party representative.		
The representative identified in Part B of this form is authorized as follows:		
<input type="checkbox"/> To sign and file rebate applications on my behalf. The rebate cheque(s) will be mailed to me.		
<input type="checkbox"/> To sign and file rebate applications on my behalf and to receive the rebate cheque(s) made payable to me. The third party identified in this authorization has to match the third party identified on the rebate application.		
<input type="checkbox"/> To file rebate applications that I have completed and to receive the rebate cheque(s) made payable to me. The third party identified in this authorization has to match the third party identified on the rebate application.		
The representative is authorized to receive confidential information from the Canada Customs and Revenue Agency <input type="checkbox"/> Yes <input type="checkbox"/> No concerning rebate claims that they have filed on my behalf.		
I declare that the amount of rebate(s) filed by my representative have not, or will not, be taken as input tax credits on my GST/HST return.		
Claimant's signature	Telephone ()	Date Y Y Y Y M M D D
E – Cancelling the Authorization - Complete this section to cancel third party authorization.		
I cancel the authorization for this representative to act on my behalf as of _____		
Claimant's signature	Telephone ()	Date Y Y Y Y M M D D

Information about this form

General

If you are using this form to authorize a third party representative, complete sections A to D. If you are cancelling authorization, complete sections A, B, and E.

If you have kept a copy of the original authorization, you may cancel it by completing section E on the copy and sending that to us.

In either case, we require an original signature for both the authorization and the cancellation of the authorization.

Section A – Claimant identification

If you are filing as an individual, enter your name and mailing address.

If you are filing for a business or other organization, enter the full legal name (include the trading or operating name, if applicable), the mailing address, and the business address if it is different from the mailing address.

The Business Number (BN) is a 15-digit account identification number that we issue. Your BN has two parts: nine digits to identify the organization; and two letters and four digits to identify the different types of accounts the organization may have. For example, if your number was for a GST/HST account, it might be: 12345 6789 RT0001.

Section B – Third party representative identification

Indicate the full legal name of the party you would like to authorize to act on your behalf.

Section C – Period of authorization

Check one box to indicate the period of time you want this authorization to be in effect. Claim transaction date(s) on your rebate applications (Forms GST189 and GST498) have to fall within the period covered by this authorization.

We will keep this authorization on file for the time you specify. You do not have to file this form with every rebate application.

Section D – Extent of authorization

Check one box to indicate the extent of the authorization and whether or not you want the third party representative to receive cheques on your behalf.

You must also indicate whether or not you authorize us to release confidential information about your rebate claims to your representative.

You or an authorized officer of the organization have to sign and date this form before we can register your representative and follow your instructions. An original signature is required.

Section E – Cancelling the authorization

Indicate the date that you want to cancel this authorization. An original signature is required.

Mailing instructions

Mail the completed form to:

Summerside Tax Centre
Summerside PE C1N 6A2
Canada