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	registe	ered	for G	ST/I	HST	?	Y	′es	N	0
Accoun ⁻	_	_		_	` . '	•	_	<i>'</i>		I

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Claimant's last name or legal name of organization (include trading name if applicable)											
Claimant's first name and initials (individuals only)											
Mailing address (number, street, and apartment no.; P.O. Box no.; or R.R. no.)											
City	Province/State Cou					untr	try				
Postal/Zip Code	Ar	ea c	ode	Те	leph	one	nur	nbei	r I		
Contact person											
Title		Area code Telephone number				r					

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/Sta	ate Country						
Postal/Zip Code	Area code	Telephone number						
Contact person								
Title	Area code	Telephone number						

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C – Period of Authorization – Complete this section when you authorize a third party representative.

Please indicate the period for which this authorization applies:

One transaction – please specify		
Specified period – from	to	
Starting on		_ until revoked.
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:



To **sign and file** rebate applications on my behalf. The rebate cheque(s) will be mailed to me.

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. 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 concerning rebate claims that they have filed on my behalf.

Yes No

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									
Area code	Telephone number	Year	Month	Day					

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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									
Area code	Telephone number	Year	Month	Day					

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.

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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