



Provincial
Treasury
Taxation and
Property Records

**Application for Marked Gasoline and/or Marked Diesel Oil Permit,
and Revenue Tax Exemption Permit for Farmers**

(Pursuant to the Prince Edward Island Gasoline Tax Act, Revenue Tax Act,
and Revenue Administration Act R.S.P.E.I. 1988)

Mail to:

Provincial Treasury, Taxation and Property Records
PO Box 1150, Charlottetown, PE C1A 7M8
Tel: (902) 569 7541 Fax: (902) 368 6164
www.taxandland.pe.ca

Deliver to:

95 Rochford Street
Shaw Building, 1st Floor
Charlottetown, PE C1A 3T6
or: any Access PEI Centre

Access No.: _____

Freedom of Information and Protection of Privacy
The personal information requested on this form is collected under the authority of Section 20 of the *Revenue Administration Act*, and is used for the purpose of tax administration and enforcement. Information may be shared under the *Freedom of Information and Protection of Privacy Act* section(s) 15(2)(g) or 37(1)(j). Questions on the collection and use of this information can be directed to the Tax Administration Supervisor at (902) 569-7542.

Section A – General Information

Ownership Type: Individual Partnership Corporation

Business Name: _____

Mailing Address:		Province:	Postal Code:
Civic Address (Street#/ Street Name/ Suite# or Apt#/ City, Town or Village):		Province:	Postal Code:
Telephone Number: ()	Fax Number: ()	E-mail:	

Section B – Owner, Partner or Officer Information

Name: _____

Mailing Address:		Province:	Postal Code:
Civic Address (Street#/ Street Name/ Suite# or Apt#/ City, Town or Village):		Province:	Postal Code:
Telephone Number: ()	Fax Number: ()	E-mail:	

Section C – Business Information

1. Does the business have a GST number or Federal BN ? Yes No **If yes**, enter either number: _____

2. Has this business or its owner(s) held a Tax Exemption Permit before? Yes No
If yes, provide the Tax Exemption Permit Number: _____

3. Did you purchase an existing business? Yes No **If yes**, complete the information below ▼
Date of purchase (mm/yyyy): _____ Purchased from: _____ Address: _____

4. List the parcel number and location of the **principal farming property**.
Parcel number: _____ Location: _____

5. Provide a breakdown of the acreage of **your farming operation**.
Acres leased: _____ Leased from: _____
Acres leased: _____ Leased to: _____
Acres owned: _____ Total acres cleared: _____ Total acres cultivated: _____

6. List the type(s) of crops cultivated and how many acres of each (**attach additional list if required**).

Type of crop	Acres	Type of crop	Acres
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7. List the type(s) and number of livestock (**attach additional list if required**).

Type of livestock	Number	Type of livestock	Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Instructions:

All applications must include a copy of last year's income tax return(s), including schedules and Notice(s) of Assessment, as well as a copy of your Farm Registration receipt.

If you are applying for the *Marked Gasoline and/or Marked Diesel Oil Permit* – **complete Section D and G.**

If you are applying as an individual or partnership for the *Marked Gasoline and/or Marked Diesel Oil Permit* and the *Revenue Tax Exemption Permit* – **complete Section D, E and G.**

If you are applying as a corporation for the *Marked Gasoline and/or Marked Diesel Oil Permit* and the *Revenue Tax Exemption Permit* – **complete Section D, F and G.**

Section D – Applying for the *Marked Gasoline and/or Marked Diesel Oil Permit*

1. List the equipment in which tax exempt fuel is to be used (**attach additional list of required**).

Type of equipment	Make and model	Horsepower	Fuel type
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Indicate the estimated annual fuel consumption of equipment listed above.

Marked gasoline: _____ litres Marked diesel oil: _____ litres Tax exempt propane: _____ litres

Section E – Applying for the *Revenue Tax Exemption Permit* as an Individual or Partnership

1. Do you receive *25% or more* of your gross annual income from the farming operation? Yes No

If yes, you may qualify for the *Revenue Tax Exemption Permit*.

Section F – Applying for the *Revenue Tax Exemption Permit* as a Corporation

1. Does the corporation receive *25% or more* of its gross annual income from the farming operation of the corporation? Yes No

If yes, the corporation may qualify for the *Revenue Tax Exemption Permit*. **Please provide financial statements for the corporation, in addition to last year's income tax return.**

Section G – Certification

I certify that the information contained herein is accurate and complete. I understand that it is an offence, subject to prosecution under the *Revenue Administration Act*, to make any false statement(s) on this application. I authorize any inspector under the *Revenue Administration Act* or any peace officer to inspect my books and records, vehicles or premises and to open any storage tank and remove therefrom any quantity of gasoline or diesel oil sufficient in their opinion, for the purposes of determining whether there has been compliance with the *Gasoline Tax Act* and the *Revenue Tax Act*.

_____	_____	_____
Name of Applicant (please print)	Title of Applicant	()
_____	_____	_____
Signature	Date	Telephone

Please include a copy of last year's income tax return(s), including schedules and Notice(s) of Assessment, and a copy of your Farm Registration receipt, with this application.

For Office Use Only

Fuel Tax Exemption Permit	Revenue Tax Exemption Permit
Application Status: Approved <input type="checkbox"/> Denied <input type="checkbox"/>	Application Status: Approved <input type="checkbox"/> Denied <input type="checkbox"/>
Approved By: _____	Approved By: _____
Fuel Tax Exemption Number: _____	Revenue Tax Exemption Number: _____
Effective Date: _____ Expiry Date: _____	Effective Date: _____ Expiry Date: _____
Fuel Type: _____	Client Number: _____
Comments: _____	Updated on: _____
	Comments: _____