Gasoline and Motive Fuel Tax Act

# <u>Purchaser's Permit Application</u> Department of Finance, Revenue and Taxation Division



PART I – APPLICANT INFORMATION						
For office use only			a. Legal	Name:		
			b. Busine	ess or Trade Name:		
			c. Busine	ess Number:		
			d. Please	e check one:		
			□ New		ewal: please in nit #	
			e. Langu	age Preference:	□ English □	□ French
f. Please Check One:  Sole Proprietorship: (one owner)  Partnership: Two or more person Service New Brunswick.  Corporation: Limited or incorpora Corporate Affairs Branch of Serv	ns must bated com	pany	with directo	•		ed with the
g. Business Mailing Address (Box #, Street, Rural Route, etc.)	: City	•		County:	Province:	Postal Code:
				<u> </u>		<u>.i</u>
Daytime Telephone: ( )	Fax: (					
h. Physical Location of Operations (Street, Avenue, etc.):	City	:		County:	Province:	Postal Code:
Daytime Telephone: ( )	Fax: (	)				
i. Physical address where records are maintained (Street, Ave	nue, etc.	): (	City:	County:	Province:	Postal Code:
Daytime Telephone: ( )	Fax: (	)				
j. Contact Person (you or your representative if you are not av	ailable du	uring 1	the day):			
Daytime Telephone: ( )	Fax: (	)		Emai	l:	
PART II – OPERATION INFORMATION						
Please select the box or boxes that describes your operati selected. Refer to the Instructions Booklet to assist you in cor					n pertaining to	each operation
☐ Aquaculturist – complete Section 1 (Instructions Page 1)			Mining and	Quarrying – complete	Section 5 (Inst	tructions Page 2)
☐ Fisher – complete Section 2 (Instructions Page 2)			·	- complete Section 6	•	<b>o</b> ,
☐ Farmer – complete Section 3 (Instructions Page 2)				cer – complete Section		- '
☐ Manufacturer – complete Section 4 (Instructions Page 2)				ucer – complete Secti		

# Purchaser's Permit Application continued



LIC		•	1	
	CENCES:			
a.	Commercial Fish Farm Permit Number	r (INCLUDE COPY OF CURREN	T PERMIT):	
b.	Shellfish Permit Number (INCLUDE C	OPY OF PERMIT):		
c.	Commercial Fish Pond Licence # issu	ed by Natural Resources, Provinc	e of NB (INCLUDE COPY OF LICENC	≣):
d.	Please check appropriate box (or box	es): Is your operation	land based and/or □ ocean base	ed?
e.	Is this a start-up operation?			
			\$ INCLUDE THE MINISTER OF AGRICULTURE A	
f.	HARVEST:	By Volume (Kilograms):	Gross Income from Aquaculture Operations:	% of Total Income from Aquaculture Operations:
	Last Year 20		\$	%
	Year Before Last 20		\$	%
g.	Please give a brief description of your	aquaculture operation(s):		
Sa	ction 2 - Fisher - Please provide th	on required information		
	LICENCES:	le required information		
a.	Fisher's Licence Number / Category is	scued by the Foderal Minister of F	isharias and Occans	
	INCLUDE COPY OF CURRENT LICE		isilelles alla Ocealis -	
	Boat Name:	Boat Registration	on # or Licence # (if not registered):	
		Boat Registration  ■ The boat operator	on # or Licence # (if not registered):	
b.	Please check one:   I am the over	•	on # or Licence # (if not registered):	
b.	Please check one:	vner OR □ the boat operator	· · · · · ·	
b.	Please check one:	vner OR □ the boat operator  the Federal Minister of Fisheries	· · · · · ·	
	Please check one:	vner OR □ the boat operator  the Federal Minister of Fisheries in one or more weirs. Pleas	and Oceans – INCLUDE COPY OF e check one  I / We do tend some o	
	Please check one:	vner OR	and Oceans – INCLUDE COPY OF e check one	weirs specified above.
C.	Please check one:	vner OR	and Oceans – INCLUDE COPY OF e check one	weirs specified above.  CLUDE COPIES OF SALES  Percentage of Total Income
C.	Please check one:	vner OR	and Oceans – INCLUDE COPY OF  e check one	weirs specified above.  CLUDE COPIES OF SALES  Percentage of Total Income
C.	Please check one:	vner OR  the boat operator  the Federal Minister of Fisheries  in one or more weirs. Pleas n one or more weirs.  invested in fishing boat and equip THE TIME OF PURCHASE OF F	and Oceans – INCLUDE COPY OF  e check one	Percentage of Total Income



a.	Provide your current Registered Professional Agricultural Producer number (issued by the Department of Agriculture and Aquaculture):	
b.	FARM ACREAGE	
	Owned Cleared:	Owned Wooded:
	Leased Cleared:	Leased Wooded:
c.	TYPE (S) OF FARMING (please check each box that best describes the type	of farming operation):
	Livestock	<u>Crops</u>
	<ul> <li>□ Beef Producer</li> <li>□ Milk Producer</li> <li>□ Poultry Farmer</li> <li>□ Pig / Sow / Hog Farmer</li> <li>□ Other Livestock - Please Specify:</li> </ul>	Potato Crop Vegetable Crop Hay Crop Grain Crop Greenhouse / Sod Producer Maple Sugar Producer Christmas Tree Producer Other Crops – Please Specify:
Sec	ction 4 – Manufacturer - Please provide the required information	
a.	Detailed Description of Manufacturing Operation:	
b.	Type of Goods Manufactured:	
Sec	ction 5 – Mining and Quarrying - Please provide the required informa	tion
	Detailed Description of Mining and Quarrying Operation:	
b.	Types of aggregate Mined or Quarried:	

# Purchaser's Permit Application continued



No		viculture a	activities under conti	act with a person	who is r	egistered with the Dep culture and forest wor			
a.	Annual Gross Incor	me from S	Silviculture		b.	Percentage of Perso	n's Total Annua	I Gross Incom	е
	Last Year	20	\$			Last Year	20		%
	Year Before Last	20	_ \$_		-	Year Before Last	20		%
C.	Christmas Trees, La Plants - Number of		ng Trees, Shrubs or d/or Trees Cultivate	•	d.	Square feet of Lands Plants in a Greenhou		hrubs, Flowers	or Bedding
	Last Year	20	Acres	Trees		Last Year	20	Sq. ft.	
	Year Before Last	20	Acres	Trees		Year Before Last	20	Sq. ft.	
e.	Number of Maple S	Sugar Tap	S		f.	Number of Acres of S	Sod produced d	uring the two p	revious years
	Last Year	20	Taps			Last Year	20	Acres	
	Year Before Last	20	Taps			Year Before Last	20	Acres	
g.	approved by the Mi	nister of N	Natural Resources to	manage at least	twenty-f	ed land) - Include copi	d.		
		r of Acres land owne				inned or planted revious years		r of Cords han ne two previou	
	Last Year	20	Acres	Last Year	20	Acres	Last Year	20	Cords
	Year Before Last	20	Acres	Year Before Las	t 20	Acres	Year Before	Last 20	Cords
h.	Thinning, Planting a		_	Number of Acr	es thinn	(owned land) ed or planted during ious years		of Cords harve	ested during the
	Last Year	20	Acres		•	Acres	Last Year		
	Year Before Last					Acres		Last 20	
				,			,		
i.	Number of Acres Ti	hinned, P	lanted or Tended (se	ervice contractor u	nder co	ntract during the two p	previous years)		
	Last Year	20	Acres			Year Before Last	20	Acres	
Se	ection 7 – Forest W	/orker - F	Please provide the	required inforn	nation				
a.	Annual Gross Incor	me from F	orest Worker Opera	tions: b.	Percen	tage of Total Annual C	Gross Income Fr	om Forest Wo	rker Operations:
	Last Year	20	\$		Last Ye	ear 20	_		%
	Year Before Last	20	\$		Year B	efore Last 20	_		%
d.		with a pe	rson registered with	the Department of	f Financ	e as a silviculturist? e as a wood producer arvesting trees in a lo		Yes	No  -  -
f.	Please provide a br	rief descri	ption of any additior	al forest work ope	rations:				

# Purchaser's Permit Application continued



No ple	ction 8 – Wood Producer - Pl te: If you perform wood harvestir ase complete Section 7 (Forest tructions.	ng activities under contract	with a person w	ho is registered with			
a.	Annual Gross Income from Woo	od Producing Operations:	b.	Percentage of Total Operations:	Annual Gros	s Income From	Wood Producing
	Last Year 20	\$		Last Year	20		%
	Year Before Last 20	\$		Year Before Last	20		%
c.	Harvesting Details (volume)						
	Last Year 20	Cords or Cubic Metres or Tonnes		Year Before Last	20	Cords or Cubic Metres or Tonnes	
d.	Number of Cords, or Cubic Met	res or Tonnes Hauled from	Stump to Skidw	ау:			
	Last Year 20	Cords or Cubic Metres or Tonnes		Year Before Last	20	Cords or Cubic Metres or Tonnes	
e.	Is this a start-up Operation?						
	<ul><li>☐ YES If Yes, indicate amo OBTAINED AT THE</li><li>☐ NO</li></ul>	unt invested in Harvesting TIME OF PURCHASE OF	Equipment \$ FAT LEAST \$10,	000.00 IN WOOD H			SALES INVOICES
f.	Please indicate the Property Ta respect to each code number.	x Account numbers of parc	els of land or wo	odlots owned (if any)	and list the	numbers of acre	s OR hectares with
	LRIS ID Number OR Property T	ax Account Number:	Numb	er of Acres OR Hecta	ares: Chec	ck appropriate u	nit of measurement:
	185015500100110010010000000000000000000		#			□ acres or	☐ hectares
			#			□ acres or	☐ hectares
			#			□ acres or	☐ hectares
g.	Please provide a brief description	on of any additional wood p	producing operati	ons:			



### **PART III – APPLICANT AGREEMENT & CONSENT**

NOTE: EVERY PERSON WHO KNOWINGLY PROVIDES FALSE OR MISLEADING INFORMATION IN THE COURSE OF MAKING AN APPLICATION FOR THE PURCHASER'S PERMIT WILL BE PROSECUTED TO THE FULLEST EXTENT OF THE LAW.

Certain information obtained on this approved application form will be provided to Canada Revenue Agency and Service New Brunswick pursuant to the provisions of the *Common Business Identifier Act.* (Note: Service New Brunswick may share such information with other public bodies for certain purposes pursuant to the provisions of the *Common Business Identifier Act.*)

Certain information obtained from the annual fuel purchase and usage report (found in Part IV of this application) may be provided to the Canada Revenue Agency pursuant to the Revenue Administration Act.

In signing this application, I hereby certify and agree to the following:

- I am operating commercially and all information given in this application and in every document submitted in support thereof is true, correct and complete in every detail;
- I will comply with all provisions under the Gasoline and Motive Fuel Tax Act and Regulations;
- I will keep and maintain records that contain the following information for all tax exempt motive fuel, tax paid motive fuel and gasoline purchased, acquired, consumed or used:
  - (a) the date of each purchase or acquisition of tax exempt motive fuel, tax paid motive fuel and gasoline;
  - (b) the name and address of the person from whom tax exempt motive fuel, tax paid motive fuel and gasoline was purchased or acquired;
  - (c) the number of gallons or litres of tax exempt motive fuel, tax paid motive fuel and gasoline purchased or acquired;
  - (d) the type of tax exempt motive fuel, tax paid motive fuel and gasoline purchased or acquired; and
  - (e) the vehicle(s) or equipment into which the tax exempt motive fuel, tax paid motive fuel and gasoline was placed, the tasks performed by that vehicle or equipment and the number of hours of service dedicated to each task.
- I consent to allowing fuel samples to be extracted from vehicles, machinery and equipment owned and/or operated in association with my business, at my place of business, work locations and random roadside checks for purposes of determining the presence of fuel that has been marked or colored:
- I accept that my failure to comply with these provisions shall be grounds for revocation of my purchaser's permit.

Finally, I hereby certify that all information given in all parts of this application and in every document submitted in support thereof is true, correct and complete in every detail.

Amount Enclosed: \$		a Purchaser's Permit is \$12.50 (valid for 1 year) payable ter of Finance.
Name of applicant or person authorized by the (Please print)	e applicant	Date
Signature (Note: An authorized signature that would corporate officer, manager, or any person a must sign this form.)	authorized by the applic	
Please mail application and address any	inquiries to:	

Department of Finance
Revenue and Taxation Division, Licensing and Registration
P.O. Box 3000, Fredericton, NB E3B 5G5

Telephone: (506) 453-2404
Fax: (506) 457-7335

**IMPORTANT**: Applicants must have completed the following or the application may be rejected:

- ✓ Part I Applicant Information
- ✓ Part II Operation Information (each section from 1 to 8 that was selected)
- ✓ Part III Applicant Agreement and Consent (applicant must sign and date the form)
- ✓ Part IV Annual Fuel Purchase and Usage Report. Note: First time applicants are not required to complete column "i" of the report.

## PART IV ANNUAL FUEL PURCHASE AND USAGE REPORT TO BE COMPLETED BY ALL APPLICANTS



Important: Pursuant to the general Regulations under the Gasoline and Motive Fuel Tax Act, the reporting requirement is for a 12 month fiscal period beginning on April 1st of one year and ending March 31st.

- > First time applicants are not required to complete Column i) which is the number of litres consumed.
- > Do NOT report gasoline.
- For purposes of this report, Motive Fuel is:
  - 1) diesel and other fuels such as propane that would be consumed within your operation. [Conversion rate for propane: # of pounds ÷ 1.124 = # litres.] (Other examples of motive fuels: stove oil, furnace oil, bio-diesel, kerosene, natural gas, crude oil, diesel distillate.)
- For purposes of this report, <u>Tax Exempt Motive Fuel</u> is:
  - 1) diesel fuel to which a dye has been added in accordance with the regulations to distinguish it from taxable motive fuel and includes stove oil and furnace oil; and
  - 2) propane purchased exempt of tax for use in qualifying areas. [Conversion rate for propane: # of pounds ÷ 1.124 = # litres.]

PURCHASE INFORMATIO	N					
a) Total litres of taxed mot	ive fuel purchased:		(litres) b) Total I	itres of tax exempt motive	fuel purchased:	(litres)
c) List of Main Motive Fue	Suppliers Note: Do not i	include Gas Bars or Convenie	ence Stores unless those are you	ır main suppliers (attach a	list if necessary):	
Name:		Name:			Name:	
Address:		Address:		·	Address:	
USAGE INFORMATION (p	ease refer to the next pa	age should you need addition	onal space)			
d) Type of Vehicle, Equipment, Boat or Machinery	e) Model Number (if available)	f) Serial Number (if available)	g) Registration Number (if applicable)	h) Type of Motive Fuel: Taxed (TMF), Tax Exempt (TEMF)	i) # of Litres Consumed	j) Usage or Function

d) Registration Number (if available) Serial Number (if available) Registration Number (if applicable) Type of Motive Fuel: Taxed (TMF), Tax Exempt (TEMF)	PART IV - USAGE INFORM	ATION continued					
	d) Type of Vehicle, Equipment, Boat or Machinery	e) Model Number (if available)	f) Serial Number (if available)	g) Registration Number (if applicable)	h) Type of Motive Fuel: Taxed (TMF), Tax Exempt (TEMF)	i) # of Litres Consumed	j) Usage or Function



Nouveau Brunswick

f. Harvest: If this is not a start-up operation, please provide the following for the last two years:

- total kilograms of harvest;
- gross income from operations before deductions (overhead costs, taxes, etc);
- percentage of your total income derived from your aquaculture operations.

g. Description of Operations:

Please describe the type of aquaculture operations engaged in, including the types of species raised and whether the operation is either land based or ocean based.

#### Section 2 - Fisher

a. Licences:

A valid licence number issued by the federal Department of Fisheries and Oceans must be provided in order to qualify under this exemption program as a fisher (include copy of licence). The name of the boat(s) and registration number(s) must also be provided. Please specify if you are the owner or the operator of the boat.

b. Weir Fisher:

A valid weir site permit number issued by the federal Department of Fisheries and Oceans must be provided in order to qualify under this exemption program as a weir fisher (include copy of licence). In addition, please check the appropriate boxes to indicate your status.

c. Start-up Operation:

If this is your first year operating as a fisher, please provide the amount invested in a fishing boat and equipment and attach a photocopy of your purchase invoice(s) showing your investment (Note: in order to qualify as a start-up, you must have invested at least \$10,000 in a fishing boat and equipment).

d. Catches:

If this is not a start-up operation, please provide the following for the last two years:

- total gross income from either commercial fishing activities or weir fishing activities before deductions (overhead costs, taxes, etc);
- total gross income from transporting fish from a fishing boat/weir to shore (if applicable); and
- percentage of total income derived.

e. Description of Operations: Please describe briefly your fishing operations, including the species harvested.

## Section 3 - Farmer

a. Registration Number:

In order to be eligible for a purchaser's permit, the applicant must be registered under the *Agricultural Producers Registration and Farm Organizations Funding Act* as a Registered Professional Agricultural Producer with the Department of Agriculture and Aquaculture. To obtain more information on how to register, please contact the Department of Agriculture and Aquaculture. If you are registered, please provide your registration number.

b. Farm Acreage:

Please specify the farm acreage owned and/or leased and the acreage within each category that is cleared or wooded.

c. Type of Farming:

Please check the box or boxes that best describes the farming activities within your operation.

#### Section 4 – Manufacturer

a. Description of Operations:

Please explain the type of manufacturing that you perform and describe your physical plant. This detail should include the steps involved in your manufacturing process.

b. Listing of Goods Produced:

Please list the types of goods manufactured.

# Section 5 – Mining and Quarrying

a. Description of Operations:

Please explain the type of mining or quarrying that you perform and describe the various steps in the process.

b. Listing of Products Mined or Quarried:

Please list all substances mined or quarried.

### Section 6 - Silviculturist

Note: You are a silviculturist if you:

- cultivate 2 acres or 2,000 Christmas trees, landscaping trees, shrubs, or plants; or
- operate a greenhouse and cultivate 2,000 square feet of landscaping trees, shrubs, flowers or bedding plants; or
- produce maple products and have at least 500 taps; or
- own at least 25 acres of woodland and during the 2 previous years, have thinned or planted at least 5 acres of woodland or harvested at least 50 cords of wood products from the woodland.

You are a silviculturist service contractor if you:

• carry out the thinning, planting and tending of at least 50 acres of forest during the 2 fiscal years preceding the date of the application and derived an annual gross income of at least \$5,000 in either of those 2 fiscal years from such activity, or at least 20% of the annual gross income in either of those 2 fiscal years from such activity.

If you do not meet the above mentioned criteria however your operation specializes in some aspect of the silviculture process, refer to Section 7 Forest Worker.

a. **Annual Gross** Income:

Please provide the total gross income from silviculture activities before deductions (overhead costs, taxes, etc) for the last two years.

b. % of Annual Gross Income:

Please indicate the percentage of your total annual gross income derived from your silviculture operation(s) for the last two years.

Trees Cultivated: C.

If you cultivate christmas trees, landscaping trees, shrubs, and/or bedding plants, please indicate the number of acres and/or trees cultivated.

d. Greenhouse Operations:

f.

If you operate a greenhouse or greenhouses, please indicate the square feet of landscaping trees, shrubs, flowers or bedding plants.

Maple Sugar Taps: e.

If you produce maple sugar, please specify the number of taps.

Sod Operations:

If you produce sod, please indicate the number of acres produced.

Woodland (with g. Management Plan):

- If you own land and you thin, plant and harvest trees with a woodlot management plan, please indicate the number of acres owned and attach a copy of your management recommendations or plan approved by the Minister of Natural Resources showing that you have managed at least twenty-five acres of woodland;
- Indicate the number of acres thinned or planted; and finally
- Please indicate the number of cords harvested, during the two previous years.
- Woodland (without h. Management Plan):
- If you own land and you thin, plant and harvest trees without a woodlot management plan, please indicate the number of acres owned showing that you have managed at least twenty-five acres of woodland;
- Indicate the number of acres thinned or planted; and finally
- Please indicate the number of cords harvested during the two previous years.
- Acres Thinned, Planted or Tended:

If you were a silviculture service contractor under contract during the two previous years, please indicate the number of acres thinned, planted or tended.

## Section 7 – Forest Worker

Note: You are a forest worker if you:

- are contracted with a person who is registered with the Department of Finance as a silviculturist; or
- are contracted with a person who is registered with the Department of Finance as a wood producer; or
- construct or maintain woods roads for the purpose of harvesting trees in a logging operation conducted in a forest area.

a.	Annual Gross
	Income:

Please provide total gross income from forest work activities before deductions (overhead costs, taxes, etc) for the last two years.

% of Annual Gross h. Income:

Please indicate the percentage of your total annual gross income derived from your forest worker operation(s) for the last two years.

Contracted by a c. Silviculturist:

Please indicate, by checking this box, if whether or not you are contracted by a registered silviculturist to perform certain specialized aspects of the silviculture process.

d. Contracted by a Wood Producer: Please indicate, by checking this box, if whether or not you are contracted by a registered wood producer to perform specialized aspects of the wood harvesting process, such as operating a slasher or a delimber.

Construction or e. Maintenance of Woods Roads:

Please indicate, by checking this box, if whether or not you engage in the construction and maintenance of woods roads for the purpose of harvesting trees conducted in a forest area only.

Additional Forest f. Worker Operations: Please use this space to provide additional details relating to your forest worker operations and, list all machinery used in your operation.

### Section 8 – Wood Producer

Note: You are a wood producer if you:

- · operate a commercial wood harvesting operation involving the felling of trees, or
- operate a commercial wood harvesting operation involving the removal of trees from stump to a skidway, log dump or carrier and, in
  either of the two (2) fiscal years preceding the date of the application, meet one or more of the following:
  - o harvest or cut an average of at least 300 cords of wood (or the equivalent of at least 300 cords of wood) and/or;
  - o derive from the operation an annual gross income of at least \$5,000.

If you do not meet the above mentioned criteria however your operation specializes in some aspect of the wood harvesting

process, refer

to Section 7 Forest Worker.

a.	Annual Gross
	Income:

Please provide the total gross income from wood producing activities before deductions (overhead costs, taxes, etc) for the last two years.

b. Percentage of Annual Gross Income: Please indicate the percentage of your total annual gross income derived from your wood producing operation(s) for the last two years.

c. Harvesting Details:

Please indicate the total volume of wood harvested during the last two years using one of the specified units of measure (can be specified in the number of cords, or cubic metres or tonnes):

(1 cord = approximately 2 cubic metres)

(1 cord of hardwood = approximately 2.1 tonnes or 1 cord of softwood = approximately 1.9 tonnes).

d. Wood Hauled from Stump to Skidway:

Please indicate the total volume of wood hauled from stump to skidway during the last two years using one of the specified units of measure (can be specified in the number of cords, or cubic metres or tonnes):

(1 cord = approximately 2 cubic metres)

(1 cord of hardwood = approximately 2.1 metric tonnes or 1 cord of softwood = approximately 1.9 metric tonnes).

e. Start-up Operation:

If this is your first year operating as a wood producer, please indicate that this is a start-up operation. Also, please indicate the amount invested in wood harvesting equipment and attach a photocopy(s) of your purchase invoices showing an investment of at least \$10,000.00.

f. Property Tax Account Numbers or LRIS ID

Please list the property tax account numbers or LRIS ID numbers for each parcel of land or woodlot owned along with the number of acres or hectares.

g. Additional Wood Producing Operations:

Numbers:

Use this space to provide additional details relating to your wood producing operations.

# PART III - APPLICANT AGREEMENT AND CONSENT

Applicant Agreement: This refers to the conditions that each applicant accepts upon signing the application.

Amount Enclosed: This refers to the applicable fee due upon application.

Signature / Date: This confirms that the applicant accepts the conditions imposed under the Applicant Agreement.

#### PART IV - ANNUAL FUEL PURCHASE AND USAGE REPORT

Note:

The reporting requirement is based on a 12 month fiscal period, beginning on April 1<sup>st</sup> and ending March 31<sup>st</sup> of the following year. For example, if your permit expires in February 2008, your annual fuel purchase and usage report would be for a twelve month period beginning April 1, 2006 and ending March 31, 2007.

If you have dual operations (example: you have a farming operation and a silviculture operation), please keep those operations separate when reporting on fuel purchase and usage.

You will be required to report on fuel purchase and usage each time you renew your permit therefore; we recommend that you keep a copy of your completed report for your records.

a. Total Litres of Taxed Motive Fuel (TMF): Enter the total litres of taxed motive fuel purchased during the last twelve months for use in commercial activities.

b.	Total Litres of Tax
	Exempt Motive
	Fuel (TEMF):

Enter the total litres of tax exempt motive fuel (marked) purchased during the last twelve months for use in commercial activities.

Suppliers:

C.

Enter the name and address of the main supplier(s) from which you purchase taxed motive fuel and/or tax exempt motive fuel. Please attach a list if necessary.

d. Type of Vehicle, Equipment, Boat or Machinery:

List all of the types of vehicle(s), equipment, boat(s) or machinery operated with fuel included in the totals recorded in "a" and "b" above.

Model Number: e.

Provide corresponding model numbers for all the types of vehicle(s), equipment, boat(s) or machinery that you listed in column d (if available).

f. Serial Number: Provide corresponding serial numbers for all the types of vehicle(s), equipment, boat(s) or machinery that you listed in column d (if available).

Registration g. Number:

If applicable, provide corresponding registration numbers for all the types of vehicle(s), equipment, boat(s) or machinery that you listed in column d.

Type of Fuel: h.

Specify the type of fuel consumed [i.e. taxed motive fuel (TMF), tax exempt motive fuel (TEMF)] for all the types of vehicle(s), equipment, boat(s) or machinery that you listed in column d.

i. Number of Litres Consumed:

Record the number of litres consumed in all types of vehicle(s), equipment, boat(s) or machinery for each fuel type that you listed in column d.

Usage or j. Function:

Specify the usage or function performed by each type of vehicle(s), equipment, boat(s) or machinery that you listed in column d - Some examples:

### Tax Exempted Usage:

- Farming
- Harvesting
- Fishing
- Christmas Trees
- Loading or Unloading Raw Material (Manufacturing site)
- Maintaining and Building Woods Roads with unlicensed equipment
- Loading or Unloading Finished Product (Manufacturing site)
- Wood Harvesting

#### Taxed Usage

- Commercial Snow Removal
- Travel
- Delivery
- Contract for Town or City
- Yard Maintenance
- **Highway Construction**
- Access Road Construction
- Waste Removal
- Whale Watching
- **Building Construction**