# Rebate Application Motor Vehicle or Heavy Equipment Purchased By Volunteer Fire Department Rebate Based on Provincial Portion of HST

#### **Eligibility Information**

Rebate is equal to the lesser of \$9,250.00 or the provincial portion of the Harmonized Sales Tax (HST) paid, after the HST Public Service Bodies Rebate has been applied, on motor vehicles or heavy equipment purchased directly by the Volunteer Fire Department and used for fire-fighting.

The Volunteer Fire Department must be registered as a non-profit/charitable organization.

An applicant/purchaser must be able to provide satisfactory evidence that tax has been paid. The <u>Purchaser</u> of the motor vehicle or heavy equipment is the <u>only party</u> entitled to a rebate.

An application for rebate must be made within 24 months from the date that the tax was paid.

#### Documents required to be kept

All documentation supporting this rebate must be retained for audit purposes.

#### Instructions for completing the application

- Give your details.
- 2. Provide details of the motor vehicle or heavy equipment.
- 3. Provide the cost of the motor vehicle or heavy equipment. The rebate is limited to a maximum of \$9,250.00.
- 4. Attach a copy of the following document to support your application:
  - a. A copy of the bill of sale or sales invoice under which the motor vehicle or heavy equipment was purchased showing the purchase price, HST paid, name of the seller and buyer, HST# of the seller and make, model and year.

Note: Failure to supply the required documents may result in delays in processing or a denial of your application

- 5. Before submitting the rebate application, review the application form to ensure that sections 1, 2 & 3 are complete and that the certification in Section 4 is signed. Allow two to four weeks for processing. If your application is not complete, it will take longer.
- 6. Return the original copy of the rebate application to:

#### By Mail:

Service Nova Scotia Refund Unit PO Box 1529 Halifax, NS B3J 2Y

Halifax, NS B3J 2Y4

For more information

#### By Delivery:

Service Nova Scotia Maritime Centre, 9<sup>th</sup> Floor North 1505 Barrington Street Halifax, Nova Scotia

Website: <a href="mailto:gov.ns.ca/snsmr/access/business/tax-commission/">gov.ns.ca/snsmr/access/business/tax-commission/</a>

Call: 902-424-6300 or 1-800-565-2336 toll free in Nova Scotia



## Service Nova Scotia Refund Section

PO Box 1529
Halifax, NS B3

B3J 2Y4

### **HST – Volunteer Fire Department**

## Rebate Application Please print clearly

**Eligible Person:** A Volunteer Fire Department registered as a non-profit/charitable organization. **Rebate:** Equal to the remaining provincial portion of the Harmonized Sales Tax (H

Equal to the remaining provincial portion of the Harmonized Sales Tax (HST) paid to a maximum of \$9,250.00, after the HST Public Service Bodies Rebate has been applied, on motor vehicles or heavy

equipment purchased directly by the Volunteer Fire Department and used for fire-fighting.

| l. Give us your d  | etails   |  |   |                     |               |
|--|--|--|---|---------------------|---------------|
| Name _   |  | Contact Name   |   |                     |               |
| Civic  |  | Phone #  |   |                     |               |
| Address  | (Civic Number and Street/Road/Hwy)   | Fax #  |   |                     |               |
| Mailing  |  | Email Address  |   |                     |               |
| Address  | (PO Box or RR)   | Canada Reven   | Canada Revenue                            |                     |               |
| City/Town  | Province   | Agency Busine  | Agency Business #                         |                     |               |
| Postal Code _  |  |  |   |                     |               |
| 2. Provide details   | s of the Motor Vehicle or Heavy I  | Equipment  |   |                     |               |
|  |  | Year   |   |                     |               |
| Serial Number  |  | Date of Purchase   |   |                     |               |
| Motor Ve   | hicle  | Before Tax   | <u>%</u><br>10%                           | <u>Amount</u>       | <u>Rebate</u> |
| Rebate 9   | % after HST Public Service Bodies  | Rehate   | •   | 50%                 |               |
| 1 (Obdio /   | date i ici i abile cel lice beales   | Nebale   |   |                     |               |
| Rebate A   |  | Nebale   |   |                     | \$9,250.00    |
| Rebate A   |  | r delivery or mailing in:  | ,   | correct in every re | ,             |
| Rebate A  Sign the Certif I HEREBY CERT  | Amount  ication (See item 6 in instructions for  | r delivery or mailing in<br>application is true, cor                   | mplete and c                              | correct in every re | espect.       |
| Rebate A  Sign the Certif I HEREBY CERT  Name (pleas                                   | Amount  ication (See item 6 in instructions for FIFY that the information given in this see print):  | r delivery or mailing in<br>application is true, cor<br><br>D          | nplete and c                              |                     | espect.       |
| Rebate A  I. Sign the Certif I HEREBY CERT  Name (pleas                                | Amount  ication (See item 6 in instructions for fifty that the information given in this see print):   | r delivery or mailing in<br>application is true, cor<br><br>D          | nplete and c                              |                     | espect.       |
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| Rebate A  I. Sign the Certif I HEREBY CERT  Name (please  Signature: _                 | Amount  ication (See item 6 in instructions for FIFY that the information given in this see print):  (Signature of Applicant or Authorized Office)                                   | r delivery or mailing in<br>application is true, cor<br><br>D<br>icer) | mplete and control itle:                  |                     | espect.       |
| Rebate A  I. Sign the Certif I HEREBY CERT  Name (pleas  Signature: _  A person who ma | Amount  ication (See item 6 in instructions for IFY that the information given in this se print):  (Signature of Applicant or Authorized Offices a false statement in contravention) | r delivery or mailing in<br>application is true, cor<br><br>D<br>icer) | mplete and contitle:  ate:  or Regulation | ons is guilty of ar | espect.       |