

## Declaration of Income for Marked Gasoline and/or Marked Diesel Oil Permits

## Mail to:

Department of Finance, **Taxation and Property Records** PO Box 1150, Charlottetown, PE C1A 7M8 Tel: (902) 368 4070 Fax: (902) 368 6164 www.princeedwardisland.ca Email: taxandland@gov.pe.ca

## Deliver to:

95 Rochford Street Shaw Building, 1st Floor Charlottetown, PE C1A 3T7

Section A - Accounting Firm

Name of Accountant:

or: any Access PEI Centre

Freedom of Information and Protection of Privacy

Personal information on this form is collected under the authority of Section 31(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purposes of tax administration and enforcement. Questions on the collection and use of this information can be directed to the Manager, Tax Administration and Compliance Services, PO Box 2000, Charlottetown, PE C1A 7N8 (902) 368-5137.

For Office Us Permit No. :	e Only:		

This form is used in lieu of the applicant providing direct proof of income from the sale of industry relevant products. The form must be completed by an accountant with a professional accounting designation, signed by all parties, and returned with an application form for a Marked Gasoline and/or Marked Diesel Oil Permit to Taxation and Property Records Division.

Name of Firm:							
Mailing Address:							
City/Town/Village:			Province:	Postal Code:	Postal Code:		
Telephone: ( )	Fax: ( )	Email:					
Section B – Applicant Information							
Individual   Partnership	☐ Corporation ☐						
Name of Individual, Partnership or Corporation:							
Business Name (if applicable):							
Mailing Address:							
City/Town/Village:	/Town/Village:		Province:	Postal Code:	Postal Code:		
Section C - Income from the Sa	ale of Industry Relevant Pro	oducts					
Sources of Industry Relevant Income				Taxation Year:			
For example: Sales of products derived from farming, fishing aquaculture and/or other operation.			sning	Inco	me		
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
	Version française égal	ement o	disponible				

Section D – Authorization and Certification	
I authorize <b>the accounting firm named in Section A</b> to release an for the purpose of determining eligibility for a Marked Fuel Permit.	ny financial information to Taxation and Property Records Division
Name of Applicant or Authorized Signing Officer	Title
Signature	Date
Accounting firm to complete (A) or (B)	
applicant named in Section B. All required tax information, including reviewed by me and I have personal knowledge of the information contains and I have personal knowledge of the informatio	
Signature	Date
(B) We certify that we are a professional accounting firm and a stareviewed the income tax return(s) for <b>the applicant named in Sec</b> and Notice(s) of Assessment, have been reviewed by the staff me herein.	ction B. All required tax information, including all schedules
Name of Contact	Title
Stamp of Accounting Firm or Authorizing Signature	. Date