



Department of
Finance
Taxation and
Property Records

Application for Marked Gasoline and/or Marked Diesel Oil Permit for Aquaculturists

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

CANADA

Mail to:

Department of Finance, Taxation and Property Records
PO Box 1150, Charlottetown, PE C1A 7M8
Tel: (902) 368 4070 Fax: (902) 368 6164

Web Site: www.princeedwardisland.ca Email: taxandland@gov.pe.ca

Deliver to:

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

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 and may be made available to fuel wholesalers or the public. 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 Use Only:

Permit No.: _____

**Please note: The prescribed issuance fee is for marked gasoline and/or marked diesel oil permit is \$10.
Please include payment of \$10 with the application.**

Section A – General Information

Ownership Type: Proprietorship Partnership Corporation

Full Applicant or Business Name: _____

Mailing Address:		Community:	Province:	Postal Code:
Civic Address:		Community:	Province:	Postal Code:
Telephone:	Cell:	Fax:	Email:	

Section B – Owner, Partner or Officer Information (If different than Section A)

Name (*Full Name Required*): _____

Mailing Address:		Community:	Province:	Postal Code:
Civic Address:		Community:	Province:	Postal Code:
Telephone:	Cell:	Fax:	Email:	

Section C – Business Information

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

2. Has this business or its owner(s) held a Marked Fuel Permit before? Yes No

If yes, provide the Marked Fuel Permit Number: _____

3. Did you recently purchase an existing aquaculture operation? Yes No **If yes**, complete the information below ▼

Date of purchase (mm/yyyy) Purchased from: Address:

4. Yearly business operation period: From: _____ To: _____

5. List the lease or license number(s), the location(s), and the species. (**attach additional list if required**).

Number	Location	Species
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Principal buyer of products: _____

Instructions: *All applications must include proof that the operation is actively engaged in the production of aquatic plants or animals or both for sale, and must report income in the name of the applicant from the sale of the aquatic plants or animals or both produced by the applicant.*

Please Note: *The name on this application must match the name on the aquaculture licenses.*

