Prince Edward	<b>Department of</b> <b>Finance</b> Taxation and Property Records	Application for Marked Gasoline and/or Marked Diesel Oil Exemption Permit for Fishers (Pursuant to the Prince Edward Island Gasoline Tax Act and Revenue Administration Act R.S.P.E.I. 1988)				
PO Box 1150, Charlottet			<b>Deliver to:</b> 95 Rochford S Shaw Building Charlotteour	g, 1st Floor		
Tel: (902) 368 4070 F Web Site: www.princeed	ax: (902) 368 6164 wardisland.ca Email: taxano	dland@gov.pe.ca	or: any Acces	n, PE C1A 3T7 ss PEI Centre		
<b>Freedom of Information and Protection of Privacy</b> Personal information on this form is collected under the authority of Section Freedom of Information and Protection of Privacy Act and will be used for of tax administration and enforcement and may be made available to fuel the public. Questions on the collection and use of this information can be Manager, Tax Administration and Compliance Services, PO Box 2000, Ch PE C1A 7N8 (902) 368-5137.			s or e	For Office Use Only: Permit No.:		
	ribed issuance fee for marked g lude payment of \$10 with the a		esel oil permit is \$10	0.		
Section A – General Inf	ormation					
Ownership Type:	□ Proprietorship □ Parti	nership 🛛 Corporatio	n			
Full Applicant or Busines	ss Name:					
Mailing Address:		Community	:	Province:	Postal Code:	
Civic Address:		Community	:	Province:	Postal Code:	
Telephone:	Cell:	Fax:	Email:			
Section B – Owner Pa	rtner or Officer Information (If d	ifferent than Section A)				
Name (Full Name Requ						
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 Fede	eral BN? 🛛 Yes 🗌	No If yes, enter	either number:		
	or its owner(s) held a Marked f Marked Fuel Permit Number:					
3. Did you recently pu Date of purchas	rrchase an existing fishing ope e (mm/yyyy)	Purchased from:	No <b>If yes</b> , co	mplete the infor Addre		
4. Yearly business op	eration period: From:		То:			
5. List the license nur	nber(s) and the species of fish	caught (attach additior	al list if required)			
Licence Number	Species	Lice	nce Number	S	Species	
6. Principal buver of f						
	Organization Support Fee Pai					
Instructions:	All applications must include the commercial fishing oper All core fishers must be in c Support Act. Confirmation of DFO license	e proof that the operation in the name of the operation in the name of the ompliance with subsec	on is reporting inc applicant. tion 8(1) of the Ce	rtified Fisherie	-	

Section D – Fuel Information						
1. Provide the following information about your vessels(s)	attach additional list if red	quired).				
Name of boat:	Home port:					
Vessel identification number:	or Vessel registration number:					
2. List the equipment in which tax exempt fuel is to be used (attach additional list if required).						
Type of equipment Make and model	Horsepower	Fuel type				
3. Indicate the estimated annual fuel consumption of equipment listed above.						
Gasoline (marked or clear): litres	Marked diesel oil:	litres				
Section E – Certification						
I certify that the information contained herein is accurate and complete. I understand that it is an offence, subject to prosecution under the <i>Revenue Administration Act</i> , to make any false statement(s) on this application. I authorize any inspector under the <i>Revenue</i> <i>Administration Act</i> to inspect my books and records, vehicles, premises or place where any business is carried on, and to open any storage tank and remove therefrom any quantity of gasoline or diesel sufficient in their opinion, for the purposes of determining whether there has been compliance with the <i>Gasoline Tax Act</i> . I have signing authority to act on behalf of the entity applying for this permit. Name (please print)						
Signature	Date	Telephone				
For Office Use Only Marked Evel Eventtion Dermit	Comments:					
Marked Fuel Exemption Permit Application Status: Approved:	Comments:					
Denied:						
Approved/Denied By:						
Access Number:						
Approval Date: Expiry Date:						
Updated On:						
Gasoline Issuance Fee:						
Gasoline: \$ Date Received: Payment Type: Cash: Cheque: Debit:						
Received By: Recorded By:						

Version française également disponible

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