



Department of
Finance
Taxation and
Property Records

**Application for Marked Gasoline and/or
Marked Diesel Oil Permit for Operations Other Than
Aquaculturists, Farmers or Fishers**

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

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 \$10. Please include payment with application.

Section A – General Information

Ownership Type: Individual Partnership Corporation

Full Business Name:

Mailing Address:

Province:

Postal Code:

Civic Address (Street#/ Street Name/ Suite# or Apt#/ City, Town or Village):

Province:

Postal Code:

Telephone Number:

()

Cell Number:

()

Fax Number:

()

Email:

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

Name (**Full Name Required**):

Mailing Address:

Province:

Postal Code:

Civic Address (Street#/ Street Name/ Suite# or Apt#/ City, Town or Village):

Province:

Postal Code:

Telephone Number:

()

Cell Number:

()

Fax Number:

()

Email:

Section C – Business Information

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

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

If yes, provide the Marked Fuel Permit Number : _____

If no, provide proof of commercial operation.

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

Date of Purchase (mm/yyyy): _____

Purchased From: _____

Address: _____

4. Yearly Business Operation Period: From: _____ To: _____

Section D – Nature of Business

1. Indicate the type of operation

Sawmill(s)

Commercial Forestry

Plant(s) for production of fertilizer, lime or feed grains

Custom potato grading

Manufacturing or industrial (stationary equipment only)

Boat(s) providing water tours – Provide a copy of the Marine Safety Inspection Certificate for each boat and complete the information below ▼

Community owned rink(s)

Custom Agricultural Services

Golf course(s)

Ski-tows

Snowmobile trail grooming

Peat Moss

Boats used in piloting ships, please complete the information below ▼

Name of boat: _____

Home port: _____

Vessel identification number: _____

or Vessel registration number: _____

(Attach an additional list if required.)

