



CANADA

Department of Finance
Taxation and Property Records

Application for Marked Gasoline and/or Marked Diesel Oil and Levy Exemption Permit for Fishers

(Pursuant to the Prince Edward Island Gasoline Tax Act, Climate Leadership 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.

For Office Use Only:

Permit No.: \_\_\_\_\_

Please note: The prescribed issuance fee for marked gasoline and/ or marked diesel oil permit is \$10.
The prescribed issuance fee for the levy exemption permit is \$10.
Please include payment of \$20 with the application.

Section A - General Information

Ownership Type: Proprietorship Partnership Corporation

Full Business Name:

Mailing Address: Province: Postal Code:

Civic Address (#/ Street / Suite# or Apt#/ City, Town or Village): 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: Province: Postal Code:

Civic Address (#/ Street/ Suite# or Apt#/ City, Town or Village): Province: Postal Code:

Telephone: Cell: Fax: Email:

Section C - Business Information

1. Does the business have a 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 purchase an existing fishing 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 license number(s) and the species of fish caught (attach additional list if required).

Number Species Number Species

6. Principal buyer of fish: \_\_\_\_\_

7. Certified Fisheries Organization Support Fee Paid: Yes No

Instructions: All applications must include proof that the operation is reporting income from the sale of products from the commercial fishing operation in the name of the applicant.

All core fishers must be in compliance with subsection 8(1) of the Certified Fisheries Organizations Support Act.

Please Note: Confirmation of DFO licenses in the name of the applicant must also be attached.

