Northwest Territories

APPLICATION FOR INTERPROVINCIAL TRUCKERS TO REPORT FUEL CONSUMPTION MONTHLY

NWT USE ONLY

PURSUANT TO THE PETROLEUM PRODUCTS ACT

APPLICANTS WILL BE REQUIRED TO PROVIDE PERFORMANCE SECURITY AS SPECIFIED BY THE SENIOR FINANCIAL OFFICER (i.e. BONDS, DEPOSITS, IRREVOCABLE BANK GUARANTEE)

THIS APPLICATION IS TO BE COMPLETED IN DUPLICATE. THE ORIGINAL COPY IS TO BE FORWARDED TO: REVENUE & TAXATION, DEPT. OF FINANCE, GOVERNMENT OF THE N.W.T., YELLOWKNIFE, N.W.T., BOX 1320, X1A 2L9.

Name of Applicant	
Name Under Which Business Is Conducted	Location of Business
Mailing Address	
Telephone Number	Telex (if applicable)

WILL YOU BE TRAVELLING IN THE N.W.T.: REGULARLY ☐ OCCASSIONALLY ☐

PLEASE LIST UNIT NUMBERS AND PS LICENCES FOR TRUCKS WHICH WILL OPERATE IN THE N.W.T.

	UNIT NUMBER AND TRUCK TYPE	PS PLATE NUMBER	NWT USE ONLY	
2				
3				
4				
5				
6				
7				
8				
9				
10				

NOTE: 1) IF ADDITIONAL SPACE IS REQUIRED PLEASE MAKE ATTACHMENTS
2) PLEASE INFORM THE REVENUE DEPT. AS TO ADDITION OR DELETION FROM LIST IN FUTURE

PLEASE STATE LOCATION AND TYPE OF OPERATIONS IN N.W.T. IF APPLICABLE i.e. offices, warehouses, keylocks

	TYPE OF OPERATION	LOCATION
A		
B		
C		
D		
E		

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND ARE GIVEN FOR THE EXPRESS PURPOSE OF OBTAINING A CONSUMPTION BASED FUEL TAX PERMIT, UNDER THE PETROLEUM PRODUCTS ACT, AND I UNDERTAKE TO COMPLY WITH THE PROVISIONS OF THE PETROLEUM PRODUCTS TAX ACT, AND REGULATION MADE THEREUNDER.

DATED AT _____ THIS _____ DAY OF _____ 19____.

_____ SIGNED

_____ TITLE

IF THE APPLICANT IS A CORPORATION, THE APPLICATION SHALL BE UNDER THE SEAL OF THE CORPORATION AND SHALL BE SIGNED BY THE PROPER OFFICER OR OFFICERS ONLY AUTHORIZED IN THAT REGARD. IF A PARTNERSHIP, SIGNATURES OF PARTNERS ARE REQUIRED.

NO FEE IS REQUIRED