

# APPLICATION FOR CARRIER LICENCE INTERNATIONAL FUEL TAX AGREEMENT (IFTA)

under the *Motor Fuel Tax Act* and the *Carbon Tax Act*

Internet: [www.sbr.gov.bc.ca/ctb](http://www.sbr.gov.bc.ca/ctb)

**Information:** Call the Consumer Taxation Branch in  
 Victoria: 250 387-0635  
 Vancouver: 604 660-4524  
 Rest of the Province: 1 877 388-4440

**Freedom of Information and Protection of Privacy Act (FOIPPA)**

The personal information on this form is collected for the purpose of administering the *Motor Fuel Tax Act* and the *Carbon Tax Act* under the authority of these Acts and section 26 of the *FOIPPA*. Questions about the collection or use of this information can be directed to the Information and Privacy Analyst, FOI Section, PO Box 9432 Stn Prov Govt, Victoria, BC V8W 9N6. (Telephone: Victoria at 250 953-3671, Vancouver at 604 660-2421 or toll-free at 1 800 663-7867 and ask to be re-directed.)

Email: [FOI.QRYS@gov.bc.ca](mailto:FOI.QRYS@gov.bc.ca)

**Note: Please mail the completed application form and any applicable fees to the address above.**

TAX ACCOUNT NO.

*Please type or print clearly*

<b>1</b>	NAME OF APPLICANT – <i>legal name of business organization, proprietor or partners</i>	FEDERAL BUSINESS NO.						
<b>2</b>	TRADE NAME/DOING BUSINESS AS – <i>If applicable</i>	US DEPARTMENT OF TRANSPORT NO. (USDOT)						
<b>3</b>	NAME OF CONTACT PERSON FOR IFTA PURPOSES							
<b>4</b>	CARRIER'S BUSINESS ADDRESS – <i>Must be a physical location, P.O. Box No. is not acceptable</i>	CITY						
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">PROVINCE/STATE/COUNTRY</td> <td style="width:25%;">POSTAL/ZIP CODE</td> <td style="width:25%;">TELEPHONE NO. (     )</td> <td style="width:25%;">FAX NO. – <i>If applicable</i> (     )</td> </tr> </table>	PROVINCE/STATE/COUNTRY	POSTAL/ZIP CODE	TELEPHONE NO. (     )	FAX NO. – <i>If applicable</i> (     )	EMAIL ADDRESS – <i>If applicable</i>		
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<b>5</b>	MAILING ADDRESS – <i>If different than business address above</i>							
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<b>6</b>	MAILING ADDRESS FOR IFTA QUARTERLY RETURNS – <i>If different than business address above</i>							
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<b>7</b>	TYPE OF OWNERSHIP							
	<input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION – <i>Number:</i> <input type="checkbox"/> OTHER – <i>Specify:</i>							
<b>8</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">INCORPORATION DATE</td> <td style="width:33%;">BUSINESS COMMENCED DATE</td> <td style="width:33%;">DATE COMMENCED TRAVEL OUTSIDE OF HOME JURISDICTION</td> </tr> <tr> <td>YYYY / MM / DD</td> <td>YYYY / MM / DD</td> <td>YYYY / MM / DD</td> </tr> </table>	INCORPORATION DATE	BUSINESS COMMENCED DATE	DATE COMMENCED TRAVEL OUTSIDE OF HOME JURISDICTION	YYYY / MM / DD	YYYY / MM / DD	YYYY / MM / DD	
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YYYY / MM / DD	YYYY / MM / DD	YYYY / MM / DD						
<b>9</b>	DO YOU HAVE AN ACTIVE IFTA LICENCE WITH ANOTHER JURISDICTION?							
	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, provide:</i>	JURISDICTION						
		IFTA LICENCE NO.						
<b>10</b>	LICENCING INFORMATION							
	IRP PRORATE NO.	SOCIAL SERVICE TAX NO.						
<b>11</b>	DID YOU PURCHASE THE BUSINESS FROM A PREVIOUS OWNER?							
	<input type="checkbox"/> YES <i>If YES, provide:</i>	PREVIOUS OWNER'S IFTA LICENCE NO.    PREVIOUS OWNER'S NAME AND ADDRESS						
	<input type="checkbox"/> NO							

<b>12</b> (1) NAME OF OWNER, PARTNER OR CORPORATE OFFICER	TELEPHONE NO. (    )
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RESIDENCE ADDRESS – *Include street, city, province/state, country and postal/zip code*

<b>(2)</b> NAME OF OWNER, PARTNER OR CORPORATE OFFICER	TELEPHONE NO. (    )
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RESIDENCE ADDRESS – *Include street, city, province/state, country and postal/zip code*

<b>(3)</b> NAME OF OWNER, PARTNER OR CORPORATE OFFICER	TELEPHONE NO. (    )
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RESIDENCE ADDRESS – *Include street, city, province/state, country and postal/zip code*

<b>13</b> DO YOU MAINTAIN BULK FUEL STORAGE IN BRITISH COLUMBIA? <input type="checkbox"/> YES <input type="checkbox"/> NO	DO YOU MAINTAIN BULK FUEL STORAGE IN OTHER JURISDICTIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If YES, list jurisdictions:</i> _____
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<b>14</b> ARE YOU REQUESTING CONSOLIDATED FLEET FUEL REPORTING? <i>(Applies only to carriers having additional fleets outside of BC)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO	<i>If YES, please send written request to BC's Commissioner as well as to the commissioner(s) of the other jurisdiction(s) for which you wish to make consolidated reports.</i>
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<b>15</b> INDICATE TYPE OF FUEL USE – <i>Check (✓) all that apply</i> <input type="checkbox"/> DIESEL <input type="checkbox"/> GASOLINE <input type="checkbox"/> PROPANE <input type="checkbox"/> GASOHOL <input type="checkbox"/> NATURAL GAS
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<b>16</b> IFTA DECALS <b>Two decals (one set)</b> are required for each qualified motor vehicle. Unless the number requested is unusually large, the branch will issue the number of decal sets that a carrier considers necessary for its business operations. Please indicate the number of qualified motor vehicles and the number of decal sets you require.	NUMBER OF QUALIFIED MOTOR VEHICLES	NUMBER OF TWO DECAL SETS REQUIRED
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<b>17</b> FEES For new IFTA applicants, the one-time registration fee is \$300. For IFTA renewals, the annual fee is \$100. Please remit applicable fee with this form and make cheque or money order payable in Canadian funds to the Minister of Finance.	FEE \$
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**18 AUTHORIZING A REPRESENTATIVE**  
Tax information is confidential. If you want the branch to deal with another individual (such as your spouse, accountant, tax preparer or solicitor) as your representative regarding fuel taxes (including IFTA), the branch will need your authorization. To do this, please complete and attach the form "Authorization or Cancellation of a Representative" (**FIN 151**) to your renewal application. This form and instructions are available at [www.sbr.gov.bc.ca/documents\\_library/forms/0151FILL.pdf](http://www.sbr.gov.bc.ca/documents_library/forms/0151FILL.pdf). Please note that any previous authorizations you may have provided automatically expire with your 2008 decals and licence.

**19 CERTIFICATION BY APPLICANT**

- The Applicant agrees:
- to comply with the reporting, payment, record keeping and licence and decal display requirements specified in the International Fuel Tax Agreement. Failure to comply with these provisions may result in suspension or cancellation of the Applicant's licence.
  - that it is responsible for ensuring that the decals issued are properly distributed and accounted for in quarterly reporting for audit purposes.
  - that the Province of British Columbia may withhold any refunds due to the Applicant if the Applicant is delinquent on payment of fuel taxes to any jurisdiction that is a signatory to the International Fuel Tax Agreement.
  - that the information contained on this application, or other tax information regarding the applicant and relating to IFTA, may be shared with other British Columbia government agencies, with other governments inside or outside of Canada, and with IFTA, Inc., (a clearinghouse located outside Canada that distributes information to member jurisdictions) for the purpose of administering the IFTA, including the determination and collection of taxes owing to/from other member jurisdictions.
  - that statements made in this application are true and complete to the best of the Applicant's knowledge.

NAME AND TITLE – <i>PLEASE TYPE OR PRINT</i>	SIGNATURE	DATE SIGNED YYYY / MM / DD
(1)	X	
(2)	X	
(3)	X	