

INTERNATIONAL FUEL TAX AGREEMENT (IFTA) LICENCE APPLICATION

Ministry of Finance
Revenue Division
PO Box 200
Regina, SK S4P 2Z6
Toll Free 1-800-667-6102
Regina (306) 787-6645
sasktaxinfo@gov.sk.ca

Licence Year _____ Prior IFTA Account # _____

Ensure that all areas of the application are completed. Incomplete applications will NOT be accepted. Forward the original application to the Ministry of Finance and retain a photocopy for your records. READ INSTRUCTIONS ON REVERSE PRIOR TO COMPLETING THE APPLICATION. (Note that the licence expires each year on December 31, a renewal reminder will be sent prior to the expiration date. Renewal requests will be submitted through Saskatchewan eTax Services (SETS) at www.sets.saskatchewan.ca).

Legal Name/Address of Applicant:

Name: _____
Address: _____
City: _____
Province: _____ Postal Code: _____
Telephone #: _____
Cell Phone #: _____
Fax #: _____
Contact Person: _____
Email Address: _____
Business Number: _____

Operating Name/Mailing Address (if applicable):

Name: _____
Address: _____
City: _____
Province: _____ Postal Code: _____
Telephone #: _____
Cell Phone #: _____
Fax #: _____
Contact Person: _____
Email Address: _____
PST Number: _____ U.S. DOT Number : _____

1. Is the applicant a resident of Saskatchewan? Yes No Briefly describe the established place of business you maintain in Saskatchewan?

Are all the records maintained in Saskatchewan? Yes No If no, where? _____

2. Indicate the types of commodities transported: Perishable Products Heavy Equip./Ag Implements Livestock Grain
 Liquid Vehicle Other _____

3. Do you wish to file a consolidated return for fleets based outside of Saskatchewan? Yes No

4. Were you ever registered in IFTA in any other jurisdiction? Yes No If yes, where? _____ When? _____

5. Indicate the fuel types for which an IFTA return will be filed _____ (G-gas, D-diesel, P-propane, O-other)

6. Do you have bulk fuel storage? Yes No If yes, in which jurisdiction(s)? _____

Certification: The applicant agrees to comply with the reporting, payment, recordkeeping and licence display requirements as specified in the International Fuel Tax Agreement. The applicant authorizes the Province to remit taxes owing to other jurisdictions on their behalf and authorizes the Province to withhold any refund of tax overpayment, if delinquent taxes are due to any member IFTA jurisdiction. The applicant authorizes the Province to exchange information with other member jurisdictions and with IFTA Inc. (a clearinghouse that distributes information to the IFTA jurisdictions). Failure to comply with these provisions shall be grounds for revocation of the IFTA licence in all member jurisdictions. I certify that I fully understand what is required of me and I certify that the information contained in this application is to the best of my knowledge, true, accurate, and complete.

Authorized Signature Title Date

IFTA Licence and Decal Fees:

Office Use: Decal #s issued _____ to _____ Date Issued: _____

Annual Licence Fee:.....\$ 65.00

Decal Fee: \$10.00 x _____ # of Vehicles:..... \$ _____

Total Fees Payable \$ _____

Total Payment Enclosed..... \$ _____

NOTE: APPLICATION FOR A NEW IFTA LICENCE CANNOT BE PROCESSED WITHOUT COPY OF VALID IRP CAB CARD

Make cheque payable to: **Minister of Finance**

INTERNATIONAL FUEL TAX AGREEMENT (IFTA)

Licence Application Guidelines

Indicate the licence year for which you are applying (note that the licence year is based on a calendar year). If you were previously registered in the IFTA Program, please identify your prior IFTA Account number.

The following information will help you to complete the IFTA application:

Legal name of applicant:

- In the case of a corporation or society, etc., this is the name registered with the Corporation's Branch and shown on your income tax returns.
- In the case of an individual or partnership, please use the surname, first name and middle name format.
- This name must always agree with the name in which the vehicles are registered.

Legal address of applicant: Use the registered street address, city, province and postal code of your business.

Contact person, emails, telephone and fax numbers: The email address, telephone and fax numbers should be those for the contact person identified. This contact person should be the person responsible for the completion of your quarterly returns.

U.S. DOT number: If you have a United States Department of Transport number, please record it.

Business number: Federal Business number; also referred to as GST number.

Operating name: As it appears on your invoices.

Mailing address: Use the street address, city, province and postal code to which you wish returns and correspondence sent. If you use a consultant, their address may be used.

Questions 1 through 6 must be completed. Incomplete applications will be rejected.

Fees: Calculate the total cost of your application by multiplying \$10 to the number of vehicles requiring decals and adding the annual licence fee of \$65.

Payment: We accept payment by Cheque, Money Order, Visa or Master Card. **Applications will be rejected if full payment is not enclosed.**

Date and sign your application and state your title. **Read the certification carefully to avoid any misunderstanding. Unsigned applications will be rejected.**

If you have any questions, call our office toll-free at 1-800-667-6102, or from within Regina call 306-787-6645, or email us at sasktaxinfo@gov.sk.ca.