

1. Give us your details:					
Given Name: First		Middle		Last	
Civic Address (Not PO Box)	Street # and Name			Unit/Suite/Apt #	
	City/Town/County	Province		Postal Code	
Mailing Address (if different)	Street # and Name, PO Box, RR#, Site #, etc.				
	City/Town/County	Pr	ovince	Postal Code	
Phone Number: Email:		I	Fax:		
2. Provide your Nova Sc	otia Driver's Licence N	Aaster Number	:		
3. Do you live on a Rese	rve in Nova Scotia?	Yes No	Reserve Name:		
4. Provide information of	n your Status recogniz	zed by the Gov	vernment of Canad	da:	
Band:		Band Number:			
Date of Birth:	Registry Number:				
	Year/Month/Day				
5. Have Membership Cle	rk Sign Certification				
as part of this of The applicant if on this form ar The Nova Scoti	-	herein, the ba	and number and r	egistry number given	
The applicant i	s a member of the			Band.	
Name of Membership Clerk (Please print)			none # hx #		
Signature of Membership Clerk			Da	ate	

See Reverse

## 6. Sign the Authorization

I hereby authorize:

- Service Nova Scotia to provide the information on my Nova Scotia Driver's Licence to retailers who sell fuel on reserves, for the purpose of administering exemptions from gasoline and diesel oil tax;
- Service Nova Scotia to provide the information on this form to the Indigenous Services Canada for the purpose of confirming the Status Card information;
- Indigenous Services Canada to release my Status Card information to Service Nova • Scotia: and
- Service Nova Scotia to use my Nova Scotia Driver's Licence information for the purpose of administering exemptions from gasoline and diesel oil tax.

Signature of Applicant

7. Sign the Terms and Condition.

- I declare that I am the individual described on this form and that the information provided by me is true, complete and correct in every respect.
- I shall not sell any gasoline or diesel oil purchased under this exemption program.
- I agree that I shall provide my Nova Scotia Driver's Licence to a retailer on a reserve solely for the purpose of obtaining a gasoline and/or diesel oil tax exemption under this program.

Signature	of	An	nlicant
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Date

Date

Disclaimer

The Province of Nova Scotia does not guarantee the confidentiality of any communications sent to NSIFTE@novascotia.ca by way of a personal email provider, as information could be intercepted, corrupted, lost, or destroyed.

Note: All information provided is subject to verification.

Should you require further information about this program please contact:

Phone: Toll Free in NS:		902-424-6717 9 1-800-565-2336	Mail:	Service Nova Scotia Maritime Centre, 6 <sup>th</sup> Floor North 1505 Barrington Street
				NSIFTE Administrator
Email: N	NGIETE	NSIFTE@novascotia.ca		PO Box 22
				Halifax, NS B3J 2L4