





Select the Fuel Tax Exemption That You Qualify Under:

If applying for exemptions (A) to (H) please complete Sections I and III and applicable parts of Section II

- (A) Forestry
- (B) Farming
- (C) Fishing
- (D) Acquaculturist
- (E) Manufacturing
- (F) Commercial Shipping
- (G) Well Driller
- (H) Fuel Purchase at Marine Rate

If applying for exemptions (1) to (6) please complete Sections I and III

- (1) Department of Transportation
- (2) Ferries
- (3) Vehicles and Equipment for Fire Fighting
- (4) Municipal Government
- (5) Railway Locomotive
- (6) School Board

Type of application: Renewal  New Application

**Section I**

1. Provide information on machinery & equipment that will use tax exempt marked fuel purchased under this Consumer's Exemption Permit.

Description	Brand/Model	Fuel Type	Engine Type	# Cyl or HP
Farm tractor (Example only)	International	Diesel	Cummins	8 cyl

2. Briefly describe your operation and indicate how the machinery and equipment is used: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Indicate the fuel company(ies) to be notified regarding your fuel purchases:

\_\_\_\_\_  
Fuel Company

\_\_\_\_\_  
Fuel Company

\_\_\_\_\_  
Fuel Company

## **Section II**

### **(A) Forestry**

Indicate type of Commercial Forestry operation:  Logging  Christmas Tree  Other \_\_\_\_\_

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### **(B) Farming**

Indicate type of Commercial Farming operation.  Field Crops  Livestock  Mixed  Other \_\_\_\_\_

NS Department of Agriculture Registration # \_\_\_\_\_

Is 51% of your gross revenue or \$10,000 earned annually from commercial farming?  Yes  No

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### **(C) Fishing**

Name of Vessel: \_\_\_\_\_  
(Please note that when a vessel is sold or a new vessel is acquired, you must notify this office.)

Federal CF License Number \_\_\_\_\_  Full Time  Part Time  
(Personal fishing license)

Federal CF Vessel Number \_\_\_\_\_

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### **(D) Aquaculture**

Indicate type of Commercial Aquaculture operation:  Fin  Shell  Other \_\_\_\_\_

NS Department of Fisheries and Aquaculture License Number \_\_\_\_\_

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### **(E) Manufacturing**

Indicate type of manufacturing operation: \_\_\_\_\_

Describe products manufactured for sale: \_\_\_\_\_

Sawmill - Indicate if sawmill involved in Custom Sawing?  Yes  No  
(Service of sawing logs not owned by applicant)

If yes, indicate approximate percent per year \_\_\_\_\_%

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### **(F) Commercial Shipping**

Indicate type of ship:  Container  Bulk Cargo  General Cargo  Other \_\_\_\_\_

Name of Vessel \_\_\_\_\_

Indicate where vessel is registered: Port \_\_\_\_\_ Country \_\_\_\_\_

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### **(G) Well Driller**

Indicate if you provide drilling services for the installation of geothermal heating cooling systems?  Yes  No

If yes, indicate approximate percent per year \_\_\_\_\_%

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### **(H) Fuel Purchase at Marine Rate**

Indicate type of ship:  Charter boat  Tug/Barge  Work boat  Diving or salvage  Other \_\_\_\_\_

Name of Vessel \_\_\_\_\_

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**Section III**

I, The Undersigned Certify That:

- (i) The information in this application is true, complete and correct in every respect.
- (ii) All relevant records are available for inspection.
- (iii) I understand that a compliance officer, or person appointed by the Commissioner, may, without warrant, examine any internal combustion engine and its fuel system or any apparatus or storage facility that contains gasoline or diesel oil and take and retain samples of that gasoline or diesel oil.
- (iv) I understand that any change in personal or business address, business operations, equipment and/or vessel addition or deletions must be forwarded to this department in writing.
- (v) I agree that upon issuance of a permit, the information contained thereon may be shared with fuel suppliers.

Name (*Please Print*): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date (D/M/Y): \_\_\_\_\_

**Consumer's Exemption Permit Fee**

\$ 93.40 Fee is required for all new applications and renewals for permits not originally issued prior to April 1, 1996 and must be submitted with this application.

Do not submit a fee with a marine rate permit application as the marine rate permit does not require a fee.

**Payment Type:**

Cheque      Money Order      Visa      Mastercard      American Express

Cheque or money order must be made payable to the Minister of Finance.

All payments must be in Canadian funds.

Post-dated cheques will not be accepted

Credit Card Number	
Exp. (mm/yy)	
Card Holder's Name (as on card)	
Card Holder's Signature	

**Amount:** \$ \_\_\_\_\_

Name (*Please Print*): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(DD/MM/YYYY)

Contact Phone #: \_\_\_\_\_

*If mailing this form back to us, please return it to:*

**Service Nova Scotia  
Business Registration Unit  
PO Box 1529  
Halifax, NS  
B3J 2Y4**