



Information:

Call the Consumer Taxation Branch in:
Victoria: 250 387-0635
Toll free in Canada: 1 877 388-4440
Fax: 250 387-5882
Internet: www.sbr.gov.bc.ca/ctb

MEDIA NUMBER:

Tax Account No.:

Return Due Date:

NSF Cheque Charge:

<p>1 TICK (✓) ANY APPLICABLE BOX</p> <table style="width:100%;"> <tr> <td style="width: 25%;"><input type="checkbox"/> AMENDED RETURN</td> <td style="width: 25%;"><input type="checkbox"/> NO TRAVEL OUTSIDE OF BC</td> <td style="width: 25%;"><input type="checkbox"/> CANCEL IFTA LICENCE (Attach IFTA Licence)</td> <td style="width: 25%;">EFFECTIVE DATE OF CANCELLATION YYYY MM DD</td> </tr> </table> <p>2 FUEL CONSUMPTION RATES</p> <p>Fuel Type: D – Diesel, G – Gasoline, A – Gasahol, P – Propane, L – LNG, C – CNG, E – Ethanol, M – Methanol, J – E85, K – M85, H – A55</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">FUEL TYPE</th> <th style="width: 25%;">TOTAL KILOMETRES ALL JURISDICTIONS (FROM NO. 6 BELOW)</th> <th style="width: 10%; text-align: center;">÷</th> <th style="width: 25%;">TOTAL LITRES PURCHASED ALL JURISDICTIONS (FROM NO. 9 BELOW)</th> <th style="width: 10%; text-align: center;">=</th> <th style="width: 15%;">AVERAGE KILOMETRES PER LITRE (take to three, round to two decimal places)</th> </tr> </thead> <tbody> <tr> <td>D – DIESEL</td> <td>_____</td> <td style="text-align: center;">÷</td> <td>_____</td> <td style="text-align: center;">=</td> <td>_____</td> </tr> <tr> <td>G – GASOLINE</td> <td>_____</td> <td style="text-align: center;">÷</td> <td>_____</td> <td style="text-align: center;">=</td> <td>_____</td> </tr> <tr> <td>-</td> <td>_____</td> <td style="text-align: center;">÷</td> <td>_____</td> <td style="text-align: center;">=</td> <td>_____</td> </tr> </tbody> </table>	<input type="checkbox"/> AMENDED RETURN	<input type="checkbox"/> NO TRAVEL OUTSIDE OF BC	<input type="checkbox"/> CANCEL IFTA LICENCE (Attach IFTA Licence)	EFFECTIVE DATE OF CANCELLATION YYYY MM DD	FUEL TYPE	TOTAL KILOMETRES ALL JURISDICTIONS (FROM NO. 6 BELOW)	÷	TOTAL LITRES PURCHASED ALL JURISDICTIONS (FROM NO. 9 BELOW)	=	AVERAGE KILOMETRES PER LITRE (take to three, round to two decimal places)	D – DIESEL	_____	÷	_____	=	_____	G – GASOLINE	_____	÷	_____	=	_____	-	_____	÷	_____	=	_____	<p>3</p> <p>Tax Due (Credit) _____</p> <p>Penalty 10% _____</p> <p>Prior Period Credits _____</p> <p>As At: _____</p> <p>TOTAL DUE (Credit) _____</p> <p>AMOUNT ENCLOSED _____</p> <p><input type="checkbox"/> REFUND REQUESTED (check only if refund is \$20.00 or more)</p>
<input type="checkbox"/> AMENDED RETURN	<input type="checkbox"/> NO TRAVEL OUTSIDE OF BC	<input type="checkbox"/> CANCEL IFTA LICENCE (Attach IFTA Licence)	EFFECTIVE DATE OF CANCELLATION YYYY MM DD																										
FUEL TYPE	TOTAL KILOMETRES ALL JURISDICTIONS (FROM NO. 6 BELOW)	÷	TOTAL LITRES PURCHASED ALL JURISDICTIONS (FROM NO. 9 BELOW)	=	AVERAGE KILOMETRES PER LITRE (take to three, round to two decimal places)																								
D – DIESEL	_____	÷	_____	=	_____																								
G – GASOLINE	_____	÷	_____	=	_____																								
-	_____	÷	_____	=	_____																								

4	5	6	7	8	9	10	11	12	13	14
JURIS-DICTION	FUEL TYPE	TOTAL KILOMETRES TRAVELLED	TAXABLE KILOMETRES TRAVELLED	TAXABLE LITRES CONSUMED (Item 7 ÷ Avg. km)	TAX PAID LITRES PURCHASED	NET TAXABLE LITRES (Item 8 minus Item 9)	TAX RATE	TAX DUE (Item 10 X Item 11)	INTEREST PAYABLE	TOTAL DUE
Please Round Columns 6 – 10 to Whole Units: Do Not Use Decimal Places										
CARRY FORWARD TOTALS										

CERTIFICATION – I certify that this report is true, correct and complete to the best of my knowledge.

SIGNATURE	TITLE	PHONE NO.	DATE SIGNED YYYY / MM / DD
		()	

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.) E-mail: FOI.QRYS@gov.bc.ca

