



BRITISH COLUMBIA

Ministry of Finance

Mailing Address: PO Box 9442 Stn Prov Govt Victoria BC V8W 9V4

SCHEDULE OF SALES OF TAX-EXEMPT FUELS TO INDIANS OR INDIAN BANDS

Under the Motor Fuel Tax Act and the Carbon Tax Act

IMPORTANT INFORMATION

- Use this form if you are an Exempt Fuel Retailer or Fuel Collector to record exempt sales to Indians and Indian bands from a retail location on reserve. You must submit this form as supporting documentation for related exempt sales reported on your monthly tax return. You may use this schedule as additional supporting documentation on refund claims for deliveries onto a reserve.

- Contact us for detailed instructions on how to record cardlock sales. If you have any questions about this form, how the Motor Fuel Tax Act and the Carbon Tax Act applies, please contact us toll free at 1 877 388-4440, or by e-mail at CTBTaxQuestions@gov.bc.ca. Additional schedules (FIN 412/2) are available on our website at www.sbr.gov.bc.ca/business/Consumer_Taxes/MotorFuelTax_CarbonTax/mft_ct.htm or by using the contact information above.

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 Manager, Program Services, PO Box 9442 Stn Prov Govt, Victoria, BC V8W 9V7. (Telephone: toll-free at 1 877 388-4440)

PART A - BUSINESS INFORMATION

Form fields for business information including Business Name, Account Number, Phone Number, Fax Number, Physical Location, and Reserve Name.

PART B - EXEMPT SALES CONFIRMATION

Table with columns for Date, Cardlock Sale, Customer's Signature, Customer's Name, Certificate of Indian Status Registry Number, and Quantity of Tax-Exempt Fuel Sold (Litres).

PART C - TOTAL VOLUMES

Summary table for total exempt sales with rows for '1. TOTAL EXEMPT SALES (THIS PAGE)', '2. TOTAL CARRIED OVER FROM LAST PAGE', and '3. TOTAL EXEMPT SALES'.

PART D - CERTIFICATION

I hereby certify that the details shown above are true and correct and that I will protect the personal and taxpayer information recorded on this form by making reasonable security arrangements against risks of unauthorized access, collection, use or disclosure.

Signature and authority fields including Signature of Authorized Signing Authority, Name of Authorized Signing Authority, Date Signed, and Page No.

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