

Mailing Address: PO Box 9447 Stn Prov Govt Victoria BC V8W 9V7 gov.bc.ca/consumertaxes

#### GENERAL INQUIRIES

Toll-free in Canada: 1 877 388-4440

### INSTRUCTIONS

- Complete this form to authorize the Consumer Taxation Programs Branch (the branch) of the Ministry of Finance to deal with another person (such as your spouse, other family member, accountant, tax preparer, or solicitor) as your representative for fuel, tobacco, and/or carbon tax matters.
- Complete this form to cancel one or more existing authorizations with the branch.

PART 1 – CLIENT INFORMATION			
FULL LEGAL NAME			
			1
MAILING ADDRESS (include street or PO box, city, province and postal	l code)		TELEPHONE NUMBER
			( )
Please indicate under which tax Act(s) your representative will be acting on your behalf (check ( $\checkmark$ ) all that apply).			
Motor Fuel Tax Act (including IFTA)	Tobacco Tax Act	Carbon Tax Act	
PART 2 – AUTHORIZATION OF A REPRESENTATIVE			
NAME OF REPRESENTATIVE (if a firm, name of firm)		FIRM NUMBER ( <i>if applicable</i> )	TELEPHONE NUMBER
			( )
MAILING ADDRESS (include street or PO box, city, province and postal	code)		FAX NUMBER
			( )
If your representative is a firm, <b>and</b> you want a specific person in the firm to represent you, state their name and title.			
<b>Note:</b> If you do not identify a specific individual in the firm, you are authorizing the branch to deal with anyone from that firm.			
NAME OF PERSON IN THE FIRM		TITLE	
TYPE OF AUTHORIZATION ( <i>check</i> ( $\checkmark$ ) all that apply)			
Authorize your representative to discuss, accept, and submit tax and			
financial information on your behalf with the branch for the purposes of the Motor Fuel Tax Act Tobacco Tax Act Carbon Tax Act			
Authorize your representative to act on your behalf only for the matter of			
Account Inquiry Applications/Appointments Decals Permits All			
TAX YEARS THAT APPLY TO THIS AUTHORIZATION ( <i>check</i> ( $\checkmark$ ) <b>one</b> only)			
All tax years, including all previous and future tax years.			
Specific tax year or years (no more than four years). List years:			
PART 3 – CANCELLATION OF ONE OR MORE EXISTING AUTHORIZATIONS (check ( $\checkmark$ ) one only)			
Cancel all existing authorizations			
If your representative is an individual within a firm, provide name and title.			
NAME OF REPRESENTATIVE ( <i>if a firm, name of firm</i> )	LAST NAME	FIRST NAME	TITLE
PART 4 – CERTIFICATION			
<ul> <li>This form will not be accepted if it is not signed by an authorized signing authority.</li> </ul>			
• By signing this form, you acknowledge that you are an authorized signing authority and you authorize the branch to deal with the			
representative identified in Part 2 according to the details provided, and cancel the existing authorization(s) as indicated in Part 3.			
SIGNATURE OF AUTHORIZED SIGNING AUTHORITY	TITLE		DATE SIGNED

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## AUTHORIZATION OR CANCELLATION OF A REPRESENTATIVE

under the Motor Fuel Tax Act, Tobacco Tax Act, Carbon Tax Act

*Freedom of Information and Protection of Privacy Act (FOIPPA)* The personal information on this form is collected for the purpose of administering the above acts under the authority of section 26(a) 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 9V4 (telephone: toll-free at 1 877 388-4440).

### See Page 2 for important information.

### Why do I need to complete this form?

Tax information is confidential. If you want the branch to deal with another individual (such as your spouse, accountant, tax preparer, or solicitor) as your representative for fuel (including IFTA), tobacco, and/or carbon tax issues, the branch will need your authorization. You can do this by completing Parts 1, 2 and 4 of this form.

Your authorization will stay in effect until you cancel it. It is important that you remember each authorization given to the branch so that you can cancel the authorization when it is no longer needed. You can cancel an existing authorization by completing Parts 1, 3 and 4 of this form. All authorizations cease upon notification of death.

You will have to complete a new *Authorization or Cancellation of a Representative* form if you want to change any information about an existing representative. For example, if your representative is a firm, you may authorize the branch to deal with a specific individual from that firm. In a future year, should you want to replace that individual with another individual from the same firm, you will have to complete a new form to update your authorization.

You can have more than one representative authorized at the same time. However, you have to complete a separate *Authorization or Cancellation of a Representative* for each representative.

# Does my spouse, common-law partner, or other family member need my authorization?

Yes. The branch cannot deal with your spouse, common-law partner, son, daughter, or other family member without your authorization.

### What will my representative be allowed to do?

When you authorize the branch to deal with a representative, you are allowing that person to act on your behalf in almost all tax matters for the tax year(s) you specify. For example, the representative will be allowed to discuss your confidential tax information with the branch and ask the branch to make changes to your tax return. Should you wish to authorize your representative to represent you only in specific issues, please specify which issues in Part 2.

### What happens if I do not sign this form?

If you do not sign this form, the branch cannot be sure that you have given the branch the authority to deal with the representative identified on the form. To protect the confidentiality of your tax information, the branch will not accept or act on any information given on this form unless you have signed the form.

### What if I need more information or assistance?

If you need more information or further assistance in completing this form, call us toll-free in Canada at 1 877 388-4440 or email us at **CTBTaxQuestions@ gov.bc.ca** Information is also available on our website at **gov.bc.ca/consumertaxes** 

### Where do I send my completed form?

Mail your completed form to:

Consumer Taxation Programs Branch Ministry of Finance PO Box 9447 Stn Prov Govt Victoria BC V8W 9V7

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