Yukon
Finance

F.O.T. APPLICATION 7A
FUEL OIL TAX ACT

REFUND OF FUEL OIL TAX COLLECTED VIA PREPAID SINGLE TRIP EMBLEM

Name_____

Address _____

Phone _____ Fax _____ Email _____

Notes
1. Use a separate form for each fuel permit. Attach a copy of **FUEL PERMIT** and Yukon fuel receipts
2. Please submit Refunds by December 31st of the following year
3. **Fuel receipts must show the date of purchase, Fuel type, number of litres and fuel vendor name. Credit card slips without details are not satisfactory proof of purchase.**

Type of fuel (Reefer fuel is not eligible) ☐ DIESEL ☐ GASOLINE

STATEMENT OF TAX PAID

Date of purchase	Purchased from	Invoice no. (attach copies)	Litres purchased
		Total purchases	

Single trip fuel permit no. _____

Entry date _____

Exit date _____

CALCULATION OF TAX REFUND
Fuel tax refund will be the lesser of A or B

A. Tax on _____ litres
Diesel oil x 7.2 cents/litre

Tax on _____ litres = $ _____ A
Motorgrade gasoline x 6.2 cents/litre

B. Cost of single trip Fuel Permit = $ _____ B

LESSER OF A OR B **Refund $** _____

I, _____ (print name), _____ (print title) as a duly authorized officer of _____ (print company name)

hereby CERTIFY that I have not made a previous claim, nor received refund of tax, on the above mentioned fuel, nor any part thereof and that all statements on this claim are true and correct to the best of my knowledge.

_____ Signature

_____ Date

Mail this return to:

Deputy Head, Department of Finance, Government of Yukon
Box 2703, Whitehorse, Yukon Y1A 2C6
phone (867) 667-5345, fax (867) 456-6709

The personal information requested on this form is collected under the authority of and used for the purpose of administering the ***Fuel Oil Tax Act***. Questions about the collection or use of this information can be directed to the Yukon Department of Finance, Box 2703, Whitehorse, Yukon, Y1A 2C6, (867) 667-5343.

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Print Form Clear Form

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