



Finance, Energy and  
Municipal Affairs  
Taxation and  
Property Records

## Wholesale / Retail Tobacco Tax Refund

(Pursuant to the Prince Edward Island *Tobacco Tax Act* R.S.P.E.I. 1988)

**Mail to:**

Finance, Energy and Municipal Affairs,  
Taxation and Property Records  
PO Box 1330, Charlottetown, PE C1A 7N1

**Deliver to:**

95 Rochford Street  
Shaw Building, 1<sup>st</sup> Floor  
Charlottetown, PE C1A 3T6  
or: any Access PEI Centre

Tel: (902) 368 5703 Fax: (902) 368 6164

Email: [taxandland@gov.pe.ca](mailto:taxandland@gov.pe.ca)

Web Site: [www.taxandland.pe.ca](http://www.taxandland.pe.ca)

***Freedom of Information and Protection of Privacy***

Personal information on this form is collected under the authority of Section 31(c) of the *Freedom of Information and Protection of Privacy Act* and Section 4(1) of the *Tobacco Tax Act*. The information will be used for the purposes of tax administration and enforcement. Questions on the collection and use of this information can be directed to the Manager, Corporate and Tax Administration Services, PO Box 2000, Charlottetown, PE C1A 7N8 (902) 368-5137.

<b>Name:</b>		
<b>Mailing Address:</b>		
<b>City/Town/Village:</b>	<b>Province:</b>	<b>Postal Code:</b>
<b>Telephone: (    )</b>		
<b>Tobacco Vendor License:</b>		

Calculate below the tobacco tax refund on tobacco inventory on-hand at the close of business on Sunday, March 31, 2013. Attach copies of all supporting documentation. For additional instructions, please see the Tobacco Tax Notice - TTN:130.

	<b>Tobacco Tax Decrease</b>	<b>Tobacco Inventory On-hand</b>	<b>Tobacco Tax Refund</b>
<b>Per cigarette</b>	\$0.029	No. of cigarettes:	\$
<b>Per tobacco stick</b>	\$0.029	No. of sticks:	\$
<b>Per gram fine cut or other tobacco product</b>	\$0.018	No. of grams:	\$
<b>Total tobacco tax refund on tobacco inventory on-hand</b>			<b>\$</b>

<b>Certification</b>
I hereby certify that the information contained in this form is a full and complete statement of all tobacco inventory on-hand at the time of the tobacco tax change.
_____
Date
_____
Signature

<b>For Office Use Only</b>	
Account Number:	Processed By: