



Department of
Finance
Taxation and
Property Records

Declaration of Income for Bona Fide Farmer Status

Mail to:

Department of Finance,
Taxation and Property Records
PO Box 1150, Charlottetown, PE C1A 7M8
Tel: (902) 368 4070 Fax: (902) 368 6164
www.taxandland.pe.ca Email: taxandland@gov.pe.ca

Deliver to:

95 Rochford Street
Shaw Building, 1st Floor
Charlottetown, PE C1A 3T6

or: any Access PEI Centre

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 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, Tax Administration and Compliance Services, PO Box 2000, Charlottetown, PE C1A 7N8 (902) 368-4070.

For Office Use Only:

Fuel Permit No. : _____

This form is used in lieu of the applicant providing the most recent year's income tax return. The form must be completed by an accountant with a professional accounting designation, signed by all parties, and returned with the application form to Taxation and Property Records Division.

Section A – Accounting Firm		
Name of Accountant:		
Name of Firm:		
Mailing Address:		
City/Town/Village:	Province:	Postal Code:
Telephone: ()	Fax: ()	Email:

Section B – Applicant Information		
Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/>		
Name of Individual, Partnership or Corporation:		
Business Name (if applicable):		
Mailing Address:		
City/Town/Village:	Province:	Postal Code:

Section C – Breakdown of Total Gross Income Reported on Income Tax Return		
Sources of Gross Income on Income Tax Return For example: farming, investments, pension, etc.	Taxation Year:	
	Percentage of Total Gross Income	
		%
		%
		%
		%
		%
		%
		%
Total Income	100%	

Section D – Breakdown of Farming Income

1. Provide **all income sources** listed on the *Statement of Income and Expense* for the farming operation.

Type of Operation	Income Sources From Operation	Percentage (%) of Source Income to Total Operation Income

Section E – Authorization and Certification

I authorize **the accounting firm named in Section A** to release any financial information to Taxation and Property Records Division for the purpose of determining eligibility for a Bona Fide Farmer Status.

Name of Applicant or Authorized Signing Officer

Title

Signature

Date

Accounting firm to complete (A) or (B)

(A) I certify that I have a professional accounting designation, and I have personally reviewed the income tax return(s) for **the applicant named in Section B**. All required tax information, including all schedules and Notice(s) of Assessment, have been reviewed by me and I have personal knowledge of the information contained herein.

Name of Accountant

Signature

Date

(B) We certify that we are a professional accounting firm and a staff member having a professional accounting designation has reviewed the income tax return(s) for **the applicant named in Section B**. All required tax information, including all schedules and Notice(s) of Assessment, have been reviewed by the staff member who has personal knowledge of the information contained herein.

Name of Contact

Title

Stamp of Accounting Firm or Authorizing Signature

Date