



EXCISE DUTY RETURN - TOBACCO LICENSEE

Protected when completed

Business name	
Mailing Address	
City	
Province	Postal Code

Send this completed return to:  
**CANADA REVENUE AGENCY**  
**OTHER LEVIES DIVISION**  
**SUMMERSIDE TAX CENTRE**  
**275 POPE ROAD, SUITE 101**  
**SUMMERSIDE, PE C1N 6E7**

**1** Business Number

**2** Period covered (YYYY/MM/DD)  
From To

**3** Due date of return (YYYY/MM/DD)

Domestic - add any missing descriptions	Units	Code	Duty Payable	
Cigarettes	00	49521		4
Tobacco sticks	00	49525		5
Other manufactured tobacco	00	49522		6
Cigars	00	49520		7
Additional duty on cigars (Rate per cigar)	00	49566		8
Additional duty on cigars (Rate based on sale price)	00	49567		9
Raw leaf tobacco	00	49523		10
<b>Total (4 to 10)</b>				<b>11</b>

Duty free shops / ships' stores / customs bonded warehouses (Reduced rate)	Units	Code	Duty Payable	
Cigarettes	00	49526		12
Tobacco sticks	00	49527		13
Other manufactured tobacco	00	49528		14
<b>Total (12 to 14)</b>				<b>15</b>

Exports not exceeding 1.5% - Special duty	Units	Code	Duty Payable	
Cigarettes	00	49560		16
Tobacco sticks	00	49561		17
Other manufactured tobacco	00	49562		18
<b>Total (16 to 18)</b>				<b>19</b>

Exports exceeding 1.5% - Special duty	Units	Code	Duty Payable	
Cigarettes	00	49535		20
Tobacco sticks	00	49536		21
Other manufactured tobacco	00	49537		22
<b>Total (20 to 22)</b>				<b>23</b>

Client contact name Telephone number

<b>Net payable (11+15+19+23)</b>	<b>24</b>
<b>Refunds (B256 attached)</b>	<b>25</b>
<b>Amount due (24 minus 25)</b>	<b>26</b>
<b>Payment herewith/ credit due</b>	<b>27</b>

**CERTIFICATION**

I \_\_\_\_\_  
 Print name Title  
 hereby certify that the information in this return is true, correct and complete.

\_\_\_\_\_  
 Signature Date Telephone number

**CHANGE OF NAME AND/OR ADDRESS**

Corrected or new name of licensee (Please print)

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New mailing address (Please print)

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New address for books and records (Please print)

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New contact name (Please print)	Title (Please print)
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New telephone number  
(      )

Language of future correspondence

English       French

Effective date of above change(s)

Year	Month	Day

<p>Business closed as of</p> <table border="1"> <tr> <td>Year</td> <td>Month</td> <td>Day</td> </tr> <tr> <td>     </td> <td>   </td> <td>   </td> </tr> </table>	Year	Month	Day				<p>Reason</p> <hr/> <hr/>
Year	Month	Day					

**ADDITIONAL MATERIAL REQUIRED**

Please check here for additional:

Remittance vouchers       Return envelope (Pre-addressed) GST394       Remittance envelope (Blue band) T1190



Business name

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**1** Business Number

**2** Period covered (YYYY/MM/DD)  
From To

**TOBACCO PRODUCTS**

	Cigarettes		Tobacco sticks		Manufactured tobacco (other than cigarettes & tobacco sticks)		Cigars		Packaged raw leaf	
	Units	00	Units	00	Kilos	00	Units	00	Kilos	00
<b>Total production</b> >										

**NOT STAMPED**

To excise warehouse		00		00		00		00		00
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	Partially manufactured tobacco		Raw leaf tobacco	
	Kilos		Kilos	
<b>Opening balance</b> >		00		00

**A)**

**ADDITIONS TO INVENTORY**

Total production		00		00
Domestic receipts		00		00
Imported receipts		00		00
<b>Total additions</b> >		00		00

**B)**

**REDUCTIONS TO INVENTORY**

Taken for further manufacture		00		00
Destroyed		00		00
Domestic deliveries		00		00
To excise warehouse		00		00
Exported		00		00
<b>Total reductions</b> >		00		00

**C)**

<b>Inventory adjustment (+ or -)</b> >		00		00
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**D)**

<b>Closing balance (A+B-C+D)</b> >		00		00
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**E)**