

## FARM BUSINESS REGISTRATION FORM

Department of Agriculture, Aquaculture and Fisheries

**Registration is valid from November 1 of each year until October 31 of the following year.**

The completed form, with the appropriate payment, can be submitted through any of the following methods:

- Online:** [www.snb.ca](http://www.snb.ca)
- Phone:** SNB Teleservices: 1-888-762-8600
- In person :** Any SNB location
- Mail:** Registrar of Farms  
Department of Agriculture, Aquaculture and Fisheries  
P.O. Box 6000, Fredericton, NB E3B 5H1
- Questions :** 1-506-444-2848 or [registraroffarms@gnb.ca](mailto:registraroffarms@gnb.ca)



**Please note sections 1, 3, 5 and 6 of the application form are mandatory. Should those sections not be completed, there may be a delay in processing your application.**

### SECTION 1 – FARM BUSINESS INFORMATION

<input type="checkbox"/> Renewal application / Registration Number: NB _____		<input type="checkbox"/> New Application		<b>(check one)</b>	
Ownership Type:					
<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Partnership		<input type="checkbox"/> Corporation	
Business Name:		Legal/Owner Name:		Business Number:	
Address:		Municipality:		Province:	Postal Code:
Telephone Number:	Fax Number:		Email:		

### SECTION 2 – CONTACT PERSON

<input type="checkbox"/> SAME AS ABOVE		<b>LANGUAGE PREFERENCE</b>		<input type="checkbox"/> English	
				<input type="checkbox"/> French	
Name:		Relationship to Farm Business:			
Mailing Address:		Municipality:		Province:	Postal Code:
Telephone Number:	Fax Number:		Email:		

### SECTION 3 – REGISTRATION ELIGIBILITY

To ensure your farm business is eligible to register, please select **one or more** of the appropriate activities that apply to your farm business under the federal *Income Tax Act*:

- |                                                                    |                                                                                                                           |                                             |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Tillage of soil (crops)                   | <input type="checkbox"/> Raising or exhibiting of livestock                                                               | <input type="checkbox"/> Dairy farming      |
| <input type="checkbox"/> potato <input type="checkbox"/> vegetable | <input type="checkbox"/> beef <input type="checkbox"/> sheep <input type="checkbox"/> pork <input type="checkbox"/> goats |                                             |
| <input type="checkbox"/> hay <input type="checkbox"/> grain        |                                                                                                                           |                                             |
| _____ others                                                       | _____ others                                                                                                              | <input type="checkbox"/> Keeping of bees    |
| <input type="checkbox"/> Raising of poultry                        | <input type="checkbox"/> Maintenance of horses (racing/ exhibiting)                                                       | <input type="checkbox"/> Fur farming        |
| <input type="checkbox"/> Nursery / greenhouse                      | <input type="checkbox"/> Tree farming (Christmas trees, maple syrup)                                                      | <input type="checkbox"/> Start-up operation |
| <input type="checkbox"/> Fruit growing                             | <input type="checkbox"/> Mechanical hatching operation                                                                    |                                             |

**SECTION 4 – PAYMENT**

Please select the appropriate box corresponding to the annual gross farm income of your farm business for the most recent taxation year (**check one**):

(Check One)	Annual Gross Farm Income	Registration Fee
<input type="checkbox"/>	\$1 - \$49,999	\$150
<input type="checkbox"/>	\$50,000 - \$149,999	\$225
<input type="checkbox"/>	\$150,000 - \$249,999	\$325
<input type="checkbox"/>	\$250,000 - \$499,999	\$400
<input type="checkbox"/>	\$500,000 or more	\$500



**(SNB PLU 100003)**

Please select the appropriate payment method (**check one**):

- Debit card (if paying via online, or in person at a SNB location)
- Credit card (if paying via SNB Teleservices, online, or in person at a SNB location)
- Cash (if paying in person at a SNB location)
- Cheque payable to “Service New Brunswick” (if paying in person at a SNB location)
- Cheque payable to the “Minister of Finance” (if paying by mailing in)

**SECTION 5 – MEMBERSHIP REGISTRATION → MUST BE FILLED OUT EVERY YEAR←**

Please indicate your preference by checking **one** or **both\*** of the boxes below:

<input type="checkbox"/> I wish to register/renew as a member of the:    <a href="http://www.fermeNBfarm.ca">www.fermeNBfarm.ca</a> 1-506-452-8101 or 1-888-826-4522 (toll free)	<input type="checkbox"/> I wish to register/renew as a member of the:    <a href="http://www.nfunb.org">www.nfunb.org</a> and <a href="http://www.nfu.ca">www.nfu.ca</a> 1-506-260-0087
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**\*Please note: if you choose to be a member of both the Alliance and the NFU, a separate registration fee must be paid to each organization.**

**SECTION 6 – FARMER PURCHASER’S PERMIT**

I wish to apply for a Farmer Purchaser’s Permit under the *Gasoline and Motive Fuel Tax Act*.

- Yes
- No

Please see attached Farm Purchaser’s Permit Annual Report for details.

**SECTION 7 – DECLARATION**

With submission of payment, I agree that the information provided in this form is complete and accurate, and I understand that it is an offence under the *Agricultural Producers Registration and Farm Organizations Funding Act* to make a false statement on this form. I agree that the information contained in this application for registration can be used by other departments of the Province of New Brunswick to verify farm business eligibility for government programs and for the development of government policy. I further agree the information contained in Sections 1 – 6 will be shared with the accredited general farm organization (G.F.O.) as I have indicated in Section 5.

Signature:	Date:
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IMPORTANT: Please complete this report if you wish to obtain authorization to purchase tax exempt motive fuel for use in your farming operations.

GENERAL INFORMATION

Please check one:
[ ] New Permit [ ] Renew Permit
Registered Professional Agriculture Producer (RPAP) number:
NB \_\_\_\_\_
Legal / Owner Name: \_\_\_\_\_
Business Name: \_\_\_\_\_
Business Number: \_\_\_\_\_

REPORTING PERIOD

Beginning \_\_\_\_\_ (MM/DD/YYYY) Ending: \_\_\_\_\_ (MM/DD/YYYY)
(Note: The reporting period must consist of your most recent fiscal year or a period of 12 consecutive months following the last reported period.)

PURCHASE INFORMATION

Total litres of taxed motive fuel purchased: \_\_\_\_\_ (litres)
Total litres of tax exempt motive fuel purchased: \_\_\_\_\_ (litres)
Farm Acreage:
Owned Cleared: \_\_\_\_\_ Leased Cleared: \_\_\_\_\_
Owned Wooded: \_\_\_\_\_ Leased Wooded: \_\_\_\_\_

List of main Motive Fuel Suppliers (attach a list if necessary):
Name: \_\_\_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_
Address: \_\_\_\_\_ Address: \_\_\_\_\_ Address: \_\_\_\_\_
(Note: Do not include Gas Bars or Convenience Stores unless those are your main suppliers.)

INFORMATION ON EQUIPMENT THAT CONSUMES FUEL (Attach a list if more space is required)

Table with 2 columns: Type of Vehicle, Equipment or Machinery; Licence Plate Number (if applicable). Multiple empty rows for data entry.

CONSENT

I hereby certify that all the information provided in this report and in every document submitted in support thereof is true, correct and complete in every detail.
Name (Please Print) \_\_\_\_\_ Date \_\_\_\_\_
Signature \_\_\_\_\_
(Note: An authorized signature that would include an owner, partner, corporate officer, manager, or any person authorized by the applicant must sign this form.)

**ADDITIONAL BUSINESS**

Please select the box(es) that describe your additional business(es).

- |                                               |                                         |
|-----------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Aquaculturist        | <input type="checkbox"/> Wood Producer  |
| <input type="checkbox"/> Fisher               | <input type="checkbox"/> Silviculturist |
| <input type="checkbox"/> Mining and Quarrying | <input type="checkbox"/> Forest Worker  |
| <input type="checkbox"/> Manufacturer         |                                         |

**AGREEMENT**

NOTE: EVERY PERSON WHO KNOWINGLY PROVIDES FALSE OR MISLEADING INFORMATION IN THE COURSE OF MAKING A REPORT FOR THE PURCHASER'S PERMIT WILL BE PROSECUTED TO THE FULLEST EXTENT OF THE LAW.

Certain information obtained on this approved report form will be provided to Canada Revenue Agency and Service New Brunswick pursuant to the provisions of the *Common Business Identifier Act*. (Note: Service New Brunswick may share such information with other public bodies for certain purposes pursuant to the provisions of the *Common Business Identifier Act*.)

Certain information obtained from the fuel purchase and usage sections of this report may be provided to the Canada Revenue Agency pursuant to the *Revenue Administration Act*.

In signing this report, I hereby certify and agree to the following:

- I am operating commercially and all information given in this application and in every document submitted in support thereof is true, correct and complete in every detail;
- I will comply with all provisions under the *Gasoline and Motive Fuel Tax Act* and Regulations;
- I will keep and maintain records that contain the following information for all tax exempt motive fuel, tax paid motive fuel and gasoline purchased, acquired, consumed or used:
  - (a) the date of each purchase or acquisition of tax exempt motive fuel, tax paid motive fuel and gasoline;
  - (b) the name and address of the person from whom tax exempt motive fuel, tax paid motive fuel and gasoline was purchased or acquired;
  - (c) the number of gallons or litres of tax exempt motive fuel, tax paid motive fuel and gasoline purchased or acquired;
  - (d) the type of tax exempt motive fuel, tax paid motive fuel and gasoline purchased or acquired; and
  - (e) a list of vehicle(s) or equipment into which the tax exempt motive fuel, tax paid motive fuel or gasoline was placed.
- I consent to allowing fuel samples to be extracted from vehicles, machinery and equipment owned and/or operated in association with my business, at my place of business, work locations and random roadside checks for purposes of determining the presence of fuel that has been marked or colored;
- I accept that my failure to comply with these provisions shall be grounds for revocation of my purchaser's permit.

The personal information on this report is being collected under the authority of the *Gasoline and Motive Fuel Tax Act*, and will be used for the purposes of determining eligibility for an exemption of the Gasoline and Motive Fuel Tax on fuel consumed in farming operations and for necessary administration of fuel exemption purchases under this permit. If you have any questions regarding the collection and use of this information, please contact the Manager, Program Advisory Services, Department of Finance. (Please see contact information provided below).

**FOR FUEL RELATED INQUIRIES:**

Department of Finance  
 Revenue and Taxation Division  
 Client Services

Telephone: (800) 669-7070  
 Fax: (506) 457-7335  
 Internet : [www.gnb.ca/finance](http://www.gnb.ca/finance)

**MAIL COMPLETED REPORT TO:**

Registrar of Farms  
 Department of Agriculture, Aquaculture and Fisheries  
 P.O. Box 6000, Fredericton, NB E3B 5H1

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