


## INSTRUCTIONS

IT'S QUICK AND EASY TO GET YOUR CANADIAN TAX REFUND. JUST FOLLOW THE 3 STEPS BELOW.

**1**

Complete in full the first 3 forms with your personal, employment and residency information.

**2**

Please only sign the rest of the forms where marked with . Do not complete any other information on these forms.

**3**

Please enclose a copy of the photo and signature page of your passport for identification.


Thank you for choosing to use **taxback.com**. We look forward to working with you to apply for your Canadian tax refund. In this pack, you will find everything you need to authorise taxback.com to apply for this refund on your behalf. Please read this pack carefully, sign and return to your nearest taxback.com office.

*In order to claim your **2011** tax return we kindly ask you to follow these instructions:*


**1-3. Canadian Tax Refund application form and Residency Questionnaire**

Please fill in the enclosed form with as much detail as possible.

**4. Declaration to International Tax Services Office, Revenue Canada and Declaration to the Employer**

Please fill in the forms with your name and surname, sign and date it at the places marked with an .

**5. Customer Agreement**

Please fill in the form with your name and surname, sign and date it at the places marked with an .

**6. Refund or Balance Owning**

Please, sign and date it at the places marked with an **X**.

**7. Part 3 (Continued)**

Please, sign and date it at the places marked with an **X**.

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1<sup>st</sup> Floor,  
277-281 Oxford Street  
London W1C 2DL  
**UNITED KINGDOM**

**APPLICATION FORM**

**PERSONAL INFORMATION** PLEASE PRINT IN BLOCK CAPITALS

Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	First Name	Surname
Date of Birth ____/____/____	Nationality	SIN/ITN <input type="text"/> - <input type="text"/> - <input type="text"/>
Current Address		
Phone	Mobile	E-mail
Application for a tax refund from: 2007 <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 <input type="checkbox"/>		
Have you applied for a Canadian refund from the tax office for any tax year? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, please indicate the year(s) you have lodged a tax return: 2007 <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/>		
<i>Please attach the most recent Notice of Assessment you have from Canadian applications (If applicable)</i>		
Programme type: Working Holiday <input type="checkbox"/> Intern <input type="checkbox"/> Student <input type="checkbox"/> Other (please list):		
Date of arrival in Canada ____/____/____	Date of departure from Canada ____/____/____	

**EMPLOYMENT INFORMATION** PLEASE LIST ALL EMPLOYERS

How many employers did you have while you were in Canada?

**EMPLOYER 1**

Company name		
Location of Employment	City	Province
Worked from ____/____/____ until ____/____/____	Do you have your T4? Yes <input type="checkbox"/> No <input type="checkbox"/>	

**EMPLOYER 2**

Company name		
Location of Employment	City	Province
Worked from ____/____/____ until ____/____/____	Do you have your T4? Yes <input type="checkbox"/> No <input type="checkbox"/>	

*If you have had more than 2 employers in Canada, please write their details on a separate page.*

**OTHER INCOME**

Other income when in Canada:

Did you receive income from any source other than employment? Yes  No  If Yes, what type \_\_\_\_\_

Did you receive income from any country other than Canada? Yes  No  If Yes, provide currency \_\_\_\_\_ amount, \_\_\_\_\_ income type \_\_\_\_\_

During your time in Canada what was / is your marital status: Single  Common-Law Partner  Married  Divorced  Widowed

While you were in Canada, were any of the following people living with you: Spouse  Children  Other dependants

Please complete the below if you were married during your time in Canada and if you had any dependants during that time

**SPOUSE DETAILS** (If married)

First Name	Surname	Date of Birth ____/____/____
SIN/ITN <input type="text"/> - <input type="text"/> - <input type="text"/>	Nationality	
Is your spouse working? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, provide spouse's income statements from all sources. If working in Canada attach T4, NR4 or similar statement.)		

**CHILD/DEPENDANT'S INFORMATION\***

Full Name	Date of Birth	Full time student?	Relationship to you	Number of months lived with you during the tax year
		Yes <input type="checkbox"/> No <input type="checkbox"/>		
		Yes <input type="checkbox"/> No <input type="checkbox"/>		

*\*If more than 2 dependants provide additional information on a separate sheet.*

## RESIDENCY QUESTIONNAIRE

**The information you provide below will allow us to establish your residency for tax purposes. If you have already left Canada, please answer the questions below as you would have answered them while still in Canada.**

Full Name	SIN/ITN <input type="text"/> - <input type="text"/> - <input type="text"/>
Do you plan to settle in Canada long-term or apply to become a Canadian citizen? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>	
What is your main reason for being in Canada? Permanent employment <input type="checkbox"/> temporary employment <input type="checkbox"/> education <input type="checkbox"/> other (please specify):	
What are your living arrangements and which personal assets do you hold in Canada (tick all that apply)? staying with friends <input type="checkbox"/> own or buying home <input type="checkbox"/> renting or leasing accommodation <input type="checkbox"/> hotel, motel, hostel <input type="checkbox"/> employer provided accommodation <input type="checkbox"/> car or other vehicle <input type="checkbox"/> furniture <input type="checkbox"/> bank account / credit cards <input type="checkbox"/> Canadian Medical or Life Insurance Coverage <input type="checkbox"/> other investments / assets <input type="checkbox"/>	
What social ties do you have with Canada? member of a trade union/ professional organisation <input type="checkbox"/> member of professional organisation <input type="checkbox"/> member of religious or recreational organisation <input type="checkbox"/> member of a sports club <input type="checkbox"/> other (please specify):	
Are you a full time student in Canada (in a Canadian educational institution)? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>	
Were you taxed as a 'resident' in your home country during any of the tax years you are applying for? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure <input type="checkbox"/></span>	
Is at least 90% of your worldwide income earned in Canada during any of the tax years you are applying for? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>	
Were you a Canadian Citizen / Resident in any year prior to the tax years you are applying for? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>	

**NOTE:** Please complete only if the information below is applicable to you

### EXPENSES AND DEDUCTIONS

**A number of expenses can be claimed by you to maximise your refund. Expenses and Deductions relate to expenses incurred in Canada to Canadian institutions and / or people.**

Public transit passes	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Medical expenses	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Tuition, education or textbook expenses	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Charitable donations	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Alimony or child maintenance	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Child care expenses	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Interest on a student loan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount
Do you have any expenses not expressly mentioned?	Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, give type and amount)	
Type	Amount	
provide their details		

*I hereby certify that the residency information provided above is to the best of my knowledge true, complete and correct.*

Signature	Date ____ / ____ / ____
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Declaration to International Tax Services Office, Revenue Canada

I, \_\_\_\_\_,

grant full authority to taxback.com, to act as my agent in dealing with my Canadian income tax return application for all tax years. I authorise you to send my correspondence and refund cheque to the office of taxback.com at

**IDA Business & Technology Park, Ring Road, Kilkenny, Ireland.**

Signed ✓ CUSTOMER SIGNATURE \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ \_\_\_\_\_

DECLARATION TO THE EMPLOYER

I, \_\_\_\_\_ (name, surname)

grant full authority to Taxback Inc. trading as

**taxback.com, IDA Business & Technology Park, Ring Road, Kilkenny, Ireland,**

to act as my agent in dealing with my Canadian income tax return applications.  
I authorise that my T4(s) be sent to taxback.com.

Signed ✓ CUSTOMER SIGNATURE \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ \_\_\_\_\_

## CUSTOMER AGREEMENT

### *I confirm that:*

1. I understand that taxback.com is the trading name for the services of Taxback Inc., Chicago, USA, and its parent company Taxback, Ireland and its subsidiaries and representative companies.
2. I understand that Taxback Inc will utilise its parent company Taxback and its subsidiary and affiliate companies to gather information regarding the services where necessary and that the contract remains with Taxback Inc for the duration of the service.
3. I have signed the necessary power of attorneys to authorise Taxback. Inc, trading as taxback.com, and owned by Taxback, and referred to hereafter as the Agent, to prepare this tax return and represent me before the Canadian tax authorities.
4. I have not filed an income tax return/applied for an income tax refund from Canada for this tax year or authorised any other party to do so on my behalf.
5. I authorise the Agent to receive all correspondence from the Canadian tax authorities on my behalf.
6. I want to avail of the offer to “pay no fee up-front” when I sign up for the service. In order to avail of this option, I understand that the fee will need to be paid by me when the refund has been issued by the Canadian tax authorities.
7. I authorise the Agent to receive my refund cheque(s) from the tax authorities.
8. I further authorise the Agent to endorse the cheques, deduct the necessary fee and to send me the remaining amount.
9. I understand that once my refund is processed, I will be contacted by the Agent with regard to payment options for receiving my refund and will be able to provide my bank details.
10. Should the Agent choose for any reason not to endorse the cheque, I understand and agree that I will pay the fee due and will cash the tax office refund cheque myself.
11. Should I receive the refund directly from any other source other than the Agent, I understand and agree that I will pay the fee due to the Agent for the work completed.
12. Should I owe income tax for other tax years, and the Canadian tax authorities deduct this owed money from the refund due for other tax year (s), I understand and agree that I need to pay the Agent processing fee for each tax year for which a tax return was processed.
13. I understand that the Canadian tax authorities will make the final decision on the value of any refund due. I understand that the Agent will provide the best estimation possible based on current tax law and information given, however this is an estimation only, not a guarantee.
14. I agree to and accept the terms and conditions of service as written online at [www.taxback.com](http://www.taxback.com) and to any changes in the terms and conditions which Taxback Inc. may effect from time to time, and to the fees of the agent which represents the services I have requested and which are provided by taxback.com and/or it's affiliate companies.
15. I understand that information collected in writing and/or verbally for Canadian tax return filing services can and may be used for internal auditing purposes by taxback.com and provided to the Canadian tax authorities for external auditing purposes, subject to relevant data protection legislation.
16. I confirm that I have given taxback.com all information needed and available to me.
17. I commit to updating taxback.com of any change in my contact details.
18. I understand that taxback.com will submit my application to the relevant tax office as soon as I have been informed of the refund amount and have sent all necessary documentation. Should I wish to cancel my application, I will contact taxback.com immediately. I understand that while taxback.com will make every effort to recall my application, this may not be possible.

Signature 	Tax Number
Name in print	Date ____ / ____ / ____



**Part 3 (Continued)**

Tick either:

- **Box A** below to give consent for **all** tax years **and** specify the level of authorization; **or**
- **Box B** below to give consent for a **specific** tax year or years **and** specify the level of authorization for **each** tax year.

If you **do not specify a level** of authorization, we will **assign a level 1**.

**A.** All (past, present, and future) tax years **Level of authorization** (level 1 or 2):

**B.** Enter the applicable tax year or years (past and/or present), and specify the level of authorization (level 1 or 2) for **each** tax year.

<b>Tax year(s)</b>													
<b>Level of authorization</b>													

Month Day

If this consent is for a **trust account** and the year-end is not December 31, enter the month and day of the year-end.

**Part 4 – Consent expiry date**

Enter an expiry date for the consent given in **Part 2** or **Part 3** if you want the consent to end at a particular time. Your consent will stay in effect until you cancel it, it reaches the expiry date you choose, or we are notified of your death.

Year Month Day

**Part 5 – Cancelling one or more existing consents**

Complete this section **only** to cancel an existing consent. Tick the appropriate box.

**A.** Cancel **all** consents.  **B.** Cancel the consents given for the individual, group or business identified below:

<b>Name of individual</b>	<b>Name of business</b>
First name:	Last name:

RepID

**or**

GroupID

**or**

Business Number

**Part 6 – Signature**

You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.

I have power of attorney for this taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.

By signing and dating this form, you authorize us to deal with the individual, group, or business identified in **Part 2** or **Part 3** and/or to cancel the consents shown in **Part 5**.

We will not process this form unless it is **signed and dated** by you or your legal representative.

**This form must be received by the CRA within six months of its signature date. If not, it will not be processed.**

Print name of taxpayer or legal representative

Taxpayer or legal representative signature

Year Month Day

Date of signature