

# Tax Exemption Certificate request



Fill out the form below and submit it along with a copy of your official document (e.g., front and back of Certificate of Indian Status or Diplomat card, valid temporary status letter, government, Indian band or business exemption document).



Email  Postal mail

Date of application: \_\_\_\_\_

Please write clearly and then review your request for accuracy. If the information is illegible or incomplete, your request may not be processed.

## Information about applicant

**Business name**  
(if applicable)

**Last name\***

**First name\***

**Mailing address\***  
(street number, street)

**Unit or apartment or reserve**  
(house # or lot # if not a civic address)

**City\***  
(and/or reserve name)

**Province\***

**Postal code\***  
(A9A 9A9)

**Email**

**Telephone**

**Mailing address is the same  
as the service address\***

Yes

No

## Service address

**Business name**  
(if applicable)

**Last name\***

**First name\***

**Service address\***  
(street number, street)

**Unit or apartment or reserve**  
(house # or lot # if not a civic address)

**City\***  
(and/or reserve name)

**Province\***

**Postal code\***  
(A9A 9A9)

**Email**

**Telephone**

## Exemption information

**Certificate number/ Band #\***  
(if applicable)

**Province of  
exemption\***

ON

QC

MB

BC

SK

PE

NL/NS/NB

AB

NT/NU/YT

**Exemption information (cont'd)**

**Type of certificate\***

- First Nation - Individuals     Diplomat     Business     Government     Reseller
- First Nation - Business
- First Nation - Band
- Other: \_\_\_\_\_  
*(please specify)*

**Type of service\***

- Virgin Plus personal (Virgin Plus Mobility, Virgin Plus Internet, Virgin Plus TV)
- Virgin Plus small and medium business (First Nations business services)
- Virgin Plus large business (Enterprise/Public Sector/Resellers/Special Billing)

**Type of tax exemption**

- HST     GST     PST     QST

**Certificate expiry date\***

*(YYYY-MM-DD) If there is no expiry date, enter 2049-12-31*



**Replacement certificate**

*(Select if replacing an existing certificate)*

**Virgin Plus Account number**

**Billing account number\***

*Please provide all account numbers that apply: Internet B1 account, TV account, Mobility account, Paging account or Home phone number.*

**Billing account number (if applicable) 2**

**Billing account number (if applicable) 3**

**Billing account number (if applicable) 4**

**Billing account number (if applicable) 5**

**Billing account number (if applicable) 6**

**Billing account number (if applicable) 7**

**Other information**

**Order number**