

## Vehicle Ownership Declaration

### Instructions:

- If the applicant has joint ownership or an ownership interest in a vehicle registered to someone else (such as a spouse, caregiver or relative), this section must be completed by the registered owner of the vehicle. (If the applicant is the registered owner, do not complete this section.)
- Once completed, the registered owner of the vehicle must return this page to the applicant along with a photocopy of the valid vehicle registration.

### Registered Vehicle Owner Information

LAST NAME	FIRST NAME	MIDDLE NAME <i>(if applicable)</i>
MAILING ADDRESS <i>(include street or PO box, city, and province)</i>		POSTAL CODE
DRIVER'S LICENCE NUMBER	LICENCE PLATE NUMBER	TELEPHONE NUMBER (     )
What is your relationship with the Applicant?		
Are there multiple drivers of this vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No		

The applicant helps pay the cost(s) of the vehicle as follows (documentation may be required):

### Check (✓) all that apply

- 1  Original purchase
- 2  Lease payment
- 3  Maintenance
- 4  Insurance
- 5  Gas
- 6  Other \_\_\_\_\_

By signing below, I consent to the disclosure of my personal information between the applicant and the Ministry of Finance for the purpose of confirming the involvement of my vehicle in the Fuel Tax Refund Program for Persons with Disabilities.

SIGNATURE OF REGISTERED VEHICLE OWNER <b>X</b>	DATE SIGNED YYYY / MM / DD
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