



NOTICE OF REVOCATION OF WAIVER

Pursuant to the *Insurance Premium Tax Act*

General Inquiries: 250 953-3082
Toll-free Enquiry BC: 1 800 663-7867
Fax: 250 356-0434

INSTRUCTIONS:

- For use by a taxpayer to revoke, under subsection 16(5) of the *Insurance Premium Tax Act*, a previously filed Waiver of Assessment Period form (**FIN 27**).
- This notice must be signed by the taxpayer or authorized signing officer.
- A separate notice must be filed with the commissioner for each waiver to be revoked, together with a copy of the relevant waiver.
- The revocation becomes effective six months after the date the notice is filed. If the notice is sent by mail, the date of filing is the date the envelope is postmarked.

- A notice of revocation cannot be cancelled once it has been filed.
- **Please type or print clearly.**

Freedom of Information and Protection of Privacy Act (FOIPPA):
The personal information on this form is collected for the purpose of administering the *Insurance Premium Tax Act* under the authority of both this Act and section 26 of the FOIPPA. Questions about the collection or use of this information can be directed to the Information and Privacy Analyst, FOI Section, PO Box 9432 Stn Prov Govt, Victoria, BC V8W 9N6. (Telephone: Victoria at 250 953-3671, Vancouver at 604 660-2421 or toll-free at 1 800 663-7867 and ask to be re-directed.)
Email: FOI.QRYS@gov.bc.ca

NAME OF TAXPAYER (If there has been a name change or amalgamation, also indicate the previous name in brackets)

ADDRESS

TAXABLE INSURER – *If applicable*
ACCOUNT NUMBER

WAIVER FOR THE CALENDAR YEAR OF
YYYY

TAXPAYER OTHER THAN A TAXABLE INSURER – *If applicable*
INSURANCE POLICY NUMBER

START DATE OF POLICY
YYYY / MM / DD

I hereby revoke the attached waiver.

NAME OF TAXPAYER OR AUTHORIZED SIGNING OFFICER

POSITION OR OFFICE

SIGNATURE OF TAXPAYER OR AUTHORIZED SIGNING OFFICER

DATE SIGNED
YYYY / MM / DD

X

FOR OFFICE USE ONLY

DATE FILED WITH
THE COMMISSIONER

YYYY	MM	DD

SIGNATURE OF COMMISSIONER

POSITION OR OFFICE

DATE SIGNED
YYYY MM DD

X