



Appendix 1

Disability Assistance Confirmation

Fuel Tax Refund Program

for Persons with Disabilities

under the Motor Fuel Tax Act

Freedom of Information and Protection of Privacy Act (FOIPPA) — The personal information on this form is collected for the purpose of administering the Motor Fuel Tax Act under the authority of sections 26(a) and (c) of the FOIPPA. Questions about the collection or use of this information can be directed to the Director, Policy, Rulings and Services, PO Box 9442 Stn Prov Govt, Victoria BC V8W 9V4 (telephone: toll free at 1-877-388-4440).

If you receive disability assistance or a supplement from the Ministry of Social Development and Poverty Reduction (SDPR) under the Employment and Assistance for Persons with Disabilities Act, you can confirm your disability by signing below.

Consent for Release of Information

By signing below, I give my permission to the Ministry of Finance to confirm my eligibility for the program by:

- Providing my name, address and date of birth to the Ministry of Social Development and Poverty Reduction
- Requesting my enrolment information (start and end dates, current status) from the Ministry of Social Development and Poverty Reduction, Persons with Disabilities Assistance or Supplement program

I also confirm that I:

- Understand why I have been asked to agree to allow my personal information to be shared and collected
- Am aware of the risks or benefits of allowing my personal information to be shared and collected
- Understand my consent will last as long as I am enrolled in this program
- Understand that I may end this consent at any time, but I must do it in writing

FULL LEGAL NAME

Signature of Registrant or Representative (type your name to sign electronically)

Date Signed

YYYY / MM / DD

X