



## Information Return for Electronic Filing of an Individual's Income Tax and Benefit Return

Tax year: \_\_\_\_\_

The information on this form relates to the tax year shown in the top right corner. Before you fill out this form, read the information and instructions on page 2. The individual identified in Part A (or the individual's legal representative) must sign Part F. Your electronic filer must fill out Part C and Part D before submitting your return. Give the signed original of this form to your electronic filer and keep a copy for yourself.

### Part A – Identification and address as shown on your tax return

|   |           |  |        |                         |      |            |             |
|---|-----------|--|--------|-------------------------|------|------------|-------------|
| First name  | Last name |  |        | Social insurance number |      |            |             |
| Mailing address: Apt number – Street number – Street name |           |  | PO Box | RR                      | City | Prov./Terr | Postal code |

### Get your CRA mail electronically delivered in My Account (optional)

Email address: \_\_\_\_\_

By giving an email address, I am registering to receive email notifications from the CRA and agreeing to the terms of use on page 2.

### Part B – Declaration of amounts from your Income Tax and Benefit Return

Enter the following amounts from your return, if applicable:

|   |                                 |
|---|---------------------------------|
| Total income (line 15000) .....                             | Refund (line 48400) .....       |
| Taxable income (line 26000) .....                           | or                              |
| Total federal non-refundable tax credits (line 35000) ..... | Balance owing (line 48500) .... |

### Part C – Electronic filer identification

By signing Part F below, I declare that the following person or firm is electronically filing the new or the amended Income Tax and Benefit Return of the person named in Part A. Part F **must be signed** before the return is electronically transmitted.

|   |                                |
|---|--------------------------------|
| Name of person or firm: _____             | Electronic filer number: _____ |
| Representative identifier (Rep ID): _____ |                                |

### Part D – Document control number

The document control number generated for my electronic record: \_\_\_\_\_

### Part E – How do you want to receive your notices of assessment and reassessment? (Select one of the following options.)

☐ I am registering (as indicated in Part A above) or I am already registered to receive electronic mail from the CRA and can view and access my notices of assessment and reassessment online.

Or

☐ I would like to receive paper notices of assessment and reassessment through Canada Post.

I will receive my notices of assessment and reassessment through Canada Post once my return or amended return has been assessed. If I have already registered to receive electronic mail from the CRA and I tick this box, I understand that I **will not receive** a copy of my notice through Canada Post.

### Part F – Declaration and authorization

I declare that the information entered in parts A, B and C is correct and complete and fully discloses my income from all sources. I also declare that I have read the information on page 2, and that the electronic filer identified in Part C is filing my return. I allow this electronic filer to communicate with the CRA to correct any errors or omissions.

|   |   |     |    |    |    |  |  |  |  |  |  |      |       |     |    |    |    |  |  |  |  |
|---|---|-----|----|----|----|--|--|--|--|--|--|------|-------|-----|----|----|----|--|--|--|--|
| Signature (individual identified in Part A or legal representative) | Name and title of legal representative  |     |    |    |    |  |  |  |  |  |  |      |       |     |    |    |    |  |  |  |  |
|   | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Year</td><td>Month</td><td>Day</td><td>HH</td><td>MM</td><td>SS</td><td colspan="4"></td></tr></table> |     |    |    |    |  |  |  |  |  |  | Year | Month | Day | HH | MM | SS |  |  |  |  |
|   |   |     |    |    |    |  |  |  |  |  |  |      |       |     |    |    |    |  |  |  |  |
| Year  | Month   | Day | HH | MM | SS |  |  |  |  |  |  |      |       |     |    |    |    |  |  |  |  |

Personal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, territorial, aboriginal, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in paying interest or penalties, or in other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, and to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 211 on Info Source at [canada.ca/cra-info-source](http://canada.ca/cra-info-source).