

# STATEMENT OF ACCOUNT REQUISITION



**Note: A letter of consent must be signed by the assessed owner and attached to this application if the information is to be sent to a third party.**

**APPLICANT INFORMATION** (Please Print)

Title	Last Name	First Name		
Name of Company or organization (where applicable)				
Address			P.O. Box	
City or Town		Province	Postal Code	
E-MAIL	Telephone Number	Fax Number	Language of Preference <input type="checkbox"/> English <input type="checkbox"/> French	

**ACCOUNT INFORMATION** (Please Print)

Name of Assessed Owner		Property Account Number(s)		
Year(s) for which you are applying	Statement of Account type <input type="checkbox"/> Detailed <input type="checkbox"/> Summary	Delivery Method <input type="checkbox"/> E-MAIL <input type="checkbox"/> FAX <input type="checkbox"/> MAIL		

**FEE STRUCTURE FOR STATEMENT COVERING:**

<b>Note:</b> Calculated on a 12-month basis starting with the most recent year.		
<input type="checkbox"/> 1 month to 5 years	\$0.00	PAYMENT \$ _____
<input type="checkbox"/> 6 to 7 years (less than 1 hour of historical data recovery)	\$25.00	<input type="checkbox"/> Enclosed
<input type="checkbox"/> 8 to 9 years (1 to 2 hours of historical data recovery)	\$50.00	Payment must be made in Canadian funds.
<input type="checkbox"/> 10 years or more (more than 2 hours of historical data recovery)	\$100.00	

**A single requisition form may be used to request statements of account relating to multiple accounts; however a fee applies to statements produced on each individual account.**

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

- Mail completed application with payment to Department of Finance at above address.

**Cheques or Money Orders to be made payable to "Minister of Finance"**

Personal information on this form is collected under the authority of the *Financial Administration Act* and will be used for the purpose of researching and preparing the Statement of Property Tax Account as requested by the applicant. If there are any questions regarding the collection and use of this information please contact the Manager of Tax Accounting, Refunds and Financial Analysis, Department of Finance, P.O. Box 3000, Fredericton, NB E3B 5H1. Telephone 1-800-669-7070 or e-mail [wwwfin@gnb.ca](mailto:wwwfin@gnb.ca)

**INCOMPLETE APPLICATIONS OR APPLICATIONS RECEIVED WITHOUT PAYMENT WILL NOT BE PROCESSED**