

Part B - Declaration

I, the licensee or officer authorised by the licensee, declare:

- I am the licensee or officer authorised by the licensee to make this notification
- I understand that I must repay any overpaid subsidy
- The information provided in this form is true, complete and correct.

Signature

(Licensee/Officer authorised by the licensee)

Date

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Name

(Please print the full name of the person making the declaration)

Please return this form to:

Queensland Fuel Subsidy Scheme

GPO Box 953

Brisbane Qld 4001

Phone: 1800 814 657

Fax: 07 3227 8769

The Office of State Revenue is collecting the information on this form to determine your eligibility for the fuel subsidy under the *Fuel Subsidy Act 1997* for the transactions you have described on this form. Collection of this information is authorised by the *Fuel Subsidy Act 1997*. The information can only be disclosed by the Office to another party in the circumstances outlined in the *Fuel Subsidy Act 1997* and the *Freedom of Information Act 1992*. For further information see our website at www.osr.qld.gov.au