



# CANADA TAX REFUND PACK INSTRUCTIONS

Thank you for choosing “AmberTax” for Canada Tax Refund service. “AmberTax” offers professional assistance and fast services. Our team will make all efforts to get you the highest possible refunds in compliance with Canada Tax law!

**Please simply follow 5 STEPS to start your Tax Refund process:**

**1 STEP:** PRINT the pack and complete it

**2 STEP:** SIGN and put the date at places marked with “X”

**3 STEP:** ADD necessary documents:

- Copy of Canada entry visa (if necessary for your country)
- Copy of passport
- Copy of SIN Card
- Copy(-ies) of T-4 form(s) and/or final pay slip(s) from each of your employer(s)

**4 STEP:** SEND it by e-mail [info@ambertax.com](mailto:info@ambertax.com) OR by post:

**AmberTax**  
**PO Box 311, Kaunas**  
**LT-44005, Lithuania**

**5 STEP:** WAIT until Tax Refund money will be paid out to you!

## NOTES

### SERVICE FEES:

- Pay nothing upfront
- FEE for Tax Refund service is stated in the contract
- Replacement fee for each missing T-4 form is 25 CAD

### TAX REFUND PROCESS TIME:

You can expect your Tax Refund approximately after 3-6 month from the date when your declaration is filled and sent out to Canada. Tax Refund process for 2017 tax year will be started at January, 2018. For 2007-2016 tax year process can be started once docs are received from YOU!

## NEED HELP?

Call +370 37 206041 OR write [info@ambertax.com](mailto:info@ambertax.com)

[www.ambertax.com](http://www.ambertax.com)



## CANADA TAX REFUND APPLICATION FORM

### PERSONAL DETAILS *(Please complete in CAP letters)*

First, middle and last name:

Current address:

Phone number:

Email address:

How did you find out about AmberTax? (website/press/friend/other)

### OTHER DETAILS

Your Social Insurance number (SIN): \_\_\_\_\_

Tax year for which you request us to process Tax Return:

- 2017       2014  
 2016       2013  
 2015       Other \_\_\_\_\_

Have you already tried to get tax refund for that year?

- No       Yes (by myself)  
 Yes (in another agency)

Did you receive any income outside Canada for the relevant tax year? *If "YES", provide amount and currency*

- Yes       No

Arrival in Canada date \_\_\_\_m/\_\_\_\_d/20\_\_\_\_

Leaving Canada date \_\_\_\_m/\_\_\_\_d/20\_\_\_\_

Have you been in Canada before? *(If "Yes", please provide period)*

Have you applied for tax refund before? *(if "Yes", please provide tax period and agency)*

Last address in Canada:

### EMPLOYMENT DETAILS *(Please indicate ALL YOUR EMPLOYERS IN CANADA)*

Number of employers: \_\_\_\_\_ *If you had more than 2 employers, please provide information on separate page!*

Worked from:

\_\_\_\_/\_\_\_\_/20\_\_\_\_  
*(mm/dd/yyyy)*

Worked till:

\_\_\_\_/\_\_\_\_/20\_\_\_\_  
*(mm/dd/yyyy)*

Name and address of your employer:

Enclosed is:

- T4  
 Last pay slip  
 None of them

Worked from:

\_\_\_\_/\_\_\_\_/20\_\_\_\_  
*(mm/dd/yyyy)*

Worked till:

\_\_\_\_/\_\_\_\_/20\_\_\_\_  
*(mm/dd/yyyy)*

Name and address of your employer:

Enclosed is:

- T4  
 Last pay slip  
 None of them

I hereby agree that AmberTax Ltd. may collect and process personal data for the purpose of my tax affairs. I confirm that all provided information is correct.

DATE (mm/dd/yyyy): \_\_\_\_m/\_\_\_\_d/20\_\_\_\_

SIGNATURE: \_\_\_\_\_

Simpleta LTD., doing business as AmberTax, company identification number 136041128, represented by director Rimas Petkevicius, acting under company regulations, hereinafter referred to as AMBERTAX, and ..... personal identification number ....., hereinafter referred to as the CLIENT, are hereby concluding this contract:

1. Subject of the Contract:

1.1. The purpose of this Contract is to provide paid consultations and tax return services for the CLIENT, who worked in Canada (hereinafter referred to as the TAX REFUND).

2. Rights and obligations of the Contracting Parties:

2.1. CLIENT'S rights and obligations:

- 2.1.1. CLIENT agrees to provide all documents that are mentioned in "Canada Tax Refund Application Form" and sign all the documents that are necessary for obtaining TAX REFUND, including Power of Attorney for tax, banking and financial matters.
2.1.2. CLIENT ensures that all information provided to AMBERTAX is correct and full to the best of his/her knowledge.
2.1.3. CLIENT agrees to provide additional information and/or documents necessary for TAX REFUND upon AMBERTAX request.
2.1.4. CLIENT will not apply directly (or using third party services) with Tax Authorities of country mentioned in paragraph 1.1. of this contract for TAX REFUND of the tax years mentioned in Canada Tax Refund Application.
2.1.5. CLIENT agrees to have AMBERTAX as exclusive provider of his/her TAX REFUND services for tax years mentioned in the Canada Tax Refund Application Form.
2.1.6. CLIENT grants AMBERTAX the right to receive the whole amount entered on the TAX REFUND check issued in CLIENT'S name, also to present all TAX REFUND checks issued in CLIENT'S name to the bank and endorse (negotiate) them, or/and to receive TAX REFUNDS to AMBERTAX bank account.
2.1.7. CLIENT agrees to pay TAX REFUND consulting fee, which is 10% of the amount refunded, but not less than 75 CAD for federal tax return of personal income taxes for each tax year.
2.1.8. CLIENT ensures that personal bank information and address to which he/she requests to receive TAX REFUND is correct.
2.1.9. CLIENT has the right to withdraw from this contract within 7 days from the date when CLIENT has signed this contract.
2.1.10. CLIENT commits to update AMBERTAX of any change in his/her contact details and personal bank account in 5 days from the date such changes occurs.

2.2. AMBERTAX rights and obligations:

- 2.2.1. AMBERTAX agrees to process CLIENT'S tax returns to Tax Authorities of country mentioned in paragraph 1.1 of this contract in a timely manner and in compliance with the tax law of that country.
2.2.2. AMBERTAX agrees to use all personal information and documents provided by CLIENT only for preparation, signing and filling of tax returns, to receive and endorse (negotiate) all TAX REFUND checks issued in CLIENT'S name or/and to receive TAX REFUNDS to it's own bank account.
2.2.3. AMBERTAX assumes obligation not to disclose any personal and tax return information in any manner to any third parties without CLIENT'S written consent, except, cases when law requires disclosure of such information.
2.2.4. AMBERTAX obligates to pay out TAX REFUND to the CLIENT only after CLIENT'S TAX REFUND has been received.
2.2.5. AMBERTAX obligates to pay out TAX REFUND according to the option chosen by CLIENT in the "Tax Refund Options" form, except the following cases:
2.2.6. AMBERTAX consulting fees mentioned in paragraph 2.1.7. will increase:
2.2.7. All transfers made in euros (EUR) into banks located in EU and EEA countries are free of charge.
2.2.8. AmberTax will pay out TAX REFUND if after all AMBERTAX service fees and other expenses TAX REFUND will be 5 USD or more.
2.2.9. AMBERTAX shall not be responsible for any additional charges imposed by bank correspondent and/or beneficiary's bank.
2.2.10. If paragraphs 2.1.2., 2.1.4. and 2.1.5. of this contract are not fulfilled, AMBERTAX has the right to impose additional fee of 70 USD per tax year.
2.2.11. If CLIENT already tried to refund taxes on it's own and wants AMBERTAX to continue TAX REFUND procedure and/or follow-up TAX REFUND situation and/or receive information about the process, it will be considered as separate income tax return and fees mentioned in paragraph 2.1.7. and 2.2.6. of this contract will apply and the minimum TAX REFUND service fee will have to be paid in advance.
2.2.12. AMBERTAX may reduce service fees, depending on the discounts granted to CLIENT.
2.2.13. AMBERTAX shall not be held responsible of any tax adjustments made by Tax Authorities of country mentioned in paragraph 1.1. of this contract.
2.2.14. If CLIENT requests to receive his/her TAX REFUND in other than original currency of TAX REFUND, AMBERTAX will pay out TAX REFUND in requested currency based on non-cash currency exchange rates published on the date of payment by bank from which transfer is being made.
2.2.15. AMBERTAX shall not be held responsible for the failure to refund taxes, or for the tax liability, or for any other negative consequences, which occurred due to false, inaccurate or incomplete information provided by the CLIENT or due to CLIENT'S prior financial commitments to Tax Authorities of country mentioned in paragraph 1.1 of this contract.
2.2.16. AMBERTAX shall not be held responsible for any delays by Tax Authorities of country mentioned in paragraph 1.1 of this contract.
2.2.17. Upon CLIENT request, AMBERTAX agrees to calculate approximate TAX REFUND amount from the country mentioned in 1.1. paragraph as well as the approximate TAX REFUND service fee.

3. Remuneration Conditions

- 3.1. All fees mentioned in this contract will be deducted from CLIENT'S TAX REFUND except cases mentioned in paragraphs 2.2.5., 3.2., 3.3. and 3.4. of this contract.
3.2. If CLIENT receives TAX REFUND check(-s) directly from Tax Authorities, he/she has to pay AMBERTAX for provided (including to this contract) services within 10 days form the date when Invoice is issued by AMBERTAX.
3.3. If CLIENT is requesting his/her tax return to be filed with Tax Authorities of country mentioned in paragraph 1.1 of this contract, but is not entitled for TAX REFUND, AMBERTAX must receive CLIENT'S payment in the form of bank check or bank transfer of 75 CAD for tax return before CLIENT'S documents are filed to Tax Authorities.
3.4. If CLIENT'S total TAX REFUND received form Tax Authorities of country mentioned in paragraph 1.1 of this contract is less than the minimum TAX REFUND fee, AMBERTAX will not require that CLIENT remit AMBERTAX with the difference.

4. Final Provisions

- 4.1. A party is excused of responsibility for non-performance, if the non-performance was due to an impediment (war, natural disaster, fire and etc.), which could not be foreseen and were beyond its control at the time of the conclusion of the contract.
4.2. This contract is governed by Lithuanian law.
4.3. All disputes and differences that may arise in connection with this contract shall be settled by means of friendly negotiations between the parties.
4.4. This contract is made out in two copies of which each party shall retain one.
4.5. The contract is valid when signed by both contracting parties and received by fax, post, e-mail or in any other way.

Both contracting parties have read this contract, acknowledge that it has complete and full recognition of the terms and conditions, understand them, undertake to comply with them, agree with its contents and affix their signatures below as proof of its correctness and of the fact that this contract corresponds to their true will.

CLIENT:

Signature:.....
Full name: .....
Personal identification number: .....
Country, in which the contract was signed .....

AMBERTAX:

Simpleta LTD., dba AmberTax
Kestucio 57-8, LT-44303 Kaunas, Lithuania
Company identification number: 136041128
VAT number: LT360411219
Director: Rimas Petkevicius





T: (+370) 37 206041

F: (+370) 37 206045

www.ambertax.com

[info@ambertax.com](mailto:info@ambertax.com)

P.O. Box 311, LT-44005, Kaunas, Lithuania

## TAX REFUND OPTIONS

Before filling this part please contact your bank and find out how **to make international transfer to your personal account** if payment is coming from Lithuania in certain currency!

**NOTE:** Each international transfer fee is \$25, only transfer in EUR are made for free to clients from EU and EEA. If tax refund amount is less than \$40, AmberTax keeps the right to issue a tax refund check.

AmberTax additionally will charge one-time Financial Administration fee of \$15. This fee covers expenses related with cashing checks which are received from Tax Authorities and it's administration.

Choose transfer currency (please mark)

USD

EUR

GBP

CAD

**YOUR FULL NAME:**

*(Exactly as it appears on your bank account!!)*

**FULL BANK NAME:**

**BANK CITY AND  
COUNTRY:**

**BANK S.W.I.F.T.**

**YOUR BANK ACCOUNT NUMBER**

**Debit/credit card number is NOT your bank account number! DO NOT write your card number here!**

If your bank requires any other additional information for correct transfer to your personal bank account, please provide this information here: \_\_\_\_\_

I hereby certify that the information in this form is correct and I commit to update AmberTax of any change in my contact details and personal bank account in 5 days from the date such changes occurs. I understand that in some cases Tax Refund is issued by check in my name and I agree to receive it no matter which payment option was chosen in this form. If Tax Refund will be send by Tax Authorities to me by check or transfer - I am obligated to pay AmberTax for the provided services according to the signed contract.

DATE (mm/dd/yyyy): \_\_\_\_ m/ \_\_\_\_ d/20 \_\_\_\_

SIGNATURE: \_\_\_\_\_



Simpleta Ltd.  
o/a AmberTax  
T: (+370) 37 206041  
F: (+370) 37 206045  
www.ambertax.com  
[info@ambertax.com](mailto:info@ambertax.com)  
P.O. Box 311, LT-44005, Kaunas, Lithuania

## Declaration to International Tax Services Office, Revenue Canada

I, .....,  
(SIN: .....), grant full authority to Simpleta Ltd. to act as my agent in dealing with my Canadian income tax return applications.

Furthermore, I hereby authorize you make a check payable to Simpleta Ltd. and send all the relevant correspondence and refund check to

SIMPLETA Ltd.  
o/a AmberTax  
P.O. Box 311 Kaunas  
LT-44005 Lithuania

until revoked by me in writing.

DATE (mm/dd/yyyy): \_\_\_m/\_\_\_d/20\_\_\_

SIGNATURE: **X** \_\_\_\_\_



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## DECLARATION TO THE EMPLOYER

I,.....,  
grant full authority to Simpleta Ltd. to act as my agent in dealing with my Canadian income tax return applications.

I authorize that my T4(s) be sent to the office of Simpleta Ltd.:

SIMPLETA Ltd.  
o/a AmberTax  
P.O. Box 311 Kaunas  
LT-44005 Lithuania

DATE (mm/dd/yyyy): \_\_\_m/\_\_\_d/20\_\_\_

SIGNATURE: **X**\_\_\_\_\_

**Part 3 – Authorization expiry date**

Enter an expiry date, if applicable, otherwise the authorization will stay in effect until **you** or **your representative** cancels it or we are notified of your death.

Year			Month			Day		

**Part 4 – Cancel one or more existing authorizations**

Complete this section **only** to cancel an existing authorization. Tick the appropriate box.

Cancel **all** authorizations

or

Cancel the authorizations given for the individual, group, or business identified below:

RepID

--	--	--	--	--	--	--	--	--	--

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

GroupID

G									
---	--	--	--	--	--	--	--	--	--

Name of group: \_\_\_\_\_

Business number (BN)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name of business: \_\_\_\_\_

**Part 5 – Signature and date**

If you are the **taxpayer**, you must **sign** and **date** this form. If you are the **legal representative**, you must **tick** the box below, and **sign** and **date** this form.

**I am the legal representative for this taxpayer or estate/trust** (executor/administrator, power of attorney, the legal guardian or the trustee or custodian of this trust account).

**Important:** You must send a **complete** copy of the **legal document** giving you the authority to act in this capacity to the taxpayer's tax centre. Read the attached information sheet for tax centre addresses.

If **two or more** legal representatives are acting **jointly** on the taxpayer's behalf, **each** legal representative must sign below.

\_\_\_\_\_  
Print name of taxpayer or each legal representative

**X**

\_\_\_\_\_  
Signature of taxpayer or each legal representative,  
a parent if taxpayer is under the age of 16,  
a witness when signed with a mark

Year			Month			Day		

Date of signature

If your representative has not electronically submitted this form on your behalf then it must be submitted **within six months** of the date of signature. If not, it will not be processed.