

**WAIVER IN RESPECT OF TIME LIMIT FOR
ASSESSMENT, REASSESSMENT OR DETERMINATION**

The Alberta Corporate Tax Act

Name of Corporation (please print)	Alberta Corporate Account Number <i>(enter your 9 or 10 digit account number)</i>
Address in Full (please print)	
	Postal Code
Waiver for the taxation year: YYYY MM DD	

- For use by a corporation to waive the time limit, under section 43(1) of the Alberta Corporate Tax Act, within which the President of Treasury Board and Minister of Finance may assess, reassess or make additional assessments of tax, interest or penalties or determine refundable tax credits.
- One completed copy of this waiver is to be filed
 - a) subject to b), for 1983 and subsequent taxation years, within 3 years from the date of mailing of a notice of original assessment or notification that no tax is payable for the taxation year,
 - b) for a corporation other than a Canadian-controlled private corporation, within 4 years of the date of mailing of an original notice of assessment or notification that no tax is payable for the taxation year if the notice was mailed on or after June 25, 1988.
- In order for the waiver to be valid, the matters in respect of which the time limit is waived must be specified. The waiver must be signed by an officer of the corporation who has authority to bind the corporation.
- The waiver is to be forwarded to TAX AND REVENUE ADMINISTRATION, 9811 109 ST, EDMONTON AB T5K 2L5. Fax 780-422-5284.
- This waiver remains in force until six months after the date of filing of a Notice of Revocation of Waiver (form AT2156) in prescribed form.

WAIVER

The time limit referred to in section 43(1) of the Alberta Corporate Tax Act, within which the President of Treasury Board and Minister of Finance may reassess or make additional assessments or assess tax, interest or penalties and determine the entitlement to and amount of refundable tax credits, is hereby waived for the taxation year indicated above in respect of:

Authorized Signing Officer

Signature: _____	Position/Office: _____	Date: _____
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