

## Notice of Objection

*Income Tax Act* (Ontario)

Ontario Research Employee Stock Option Credit (Tax Refund)

Ontario Opportunity Bonds Tax Incentive

### Instructions

Please print or type information on this form and make one copy. Keep the copy for your records and send the original by **registered mail** addressed to the Ministry of Finance, c/o Director, Objections and Appeals Branch, 33 King Street West, PO Box 699, Stn A, Oshawa ON L1H 8S6.

If you have any questions or if you need help in completing this form, call 1 866 668-8297 or 1 800 263-7776 (teletypewriter TTY) or visit our website at [ontario.ca/taxappeals](http://ontario.ca/taxappeals).

If you want to object to the calculation of an amount determined under the *Income Tax Act* (Canada), contact the Canada Revenue Agency. The address and number are listed in the blue pages of the telephone book.

The envelope containing this **Notice of Objection** must be postmarked within 90 days from the day of mailing or delivery by personal service of the minister's **Notice of Entitlement** or **Notification of Assessment** of penalty, to which objection is being made.

Name of person objecting		Reference number	
Mailing address - Apt. No., Street number and name		Telephone number (      )	
City/Town	Province	Postal code 	

**Notice of Objection** is hereby given to the minister's **Notice of Entitlement** or **Notification of Assessment** of penalty dated .....

Day	Month	Year

**I object to the:** Check  applicable box

- |   |  |
|---|--|
| <input type="checkbox"/> determination that I am not entitled to a tax refund or tax incentive.<br><input type="checkbox"/> calculation of the tax refund or tax incentive amount.<br><input type="checkbox"/> determination of the amounts used in the calculation, excluding amounts determined under the <i>Income Tax Act</i> (Canada). | <input type="checkbox"/> determination that I am not a resident in Ontario for purposes of the tax refund or tax incentive.<br><input type="checkbox"/> amount of overpayment of the tax refund or tax incentive.<br><input type="checkbox"/> assessment of penalty. |
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**Issues, facts and reasons** - This Notice of Objection must clearly describe each issue raised by way of objection, and must fully set out the facts and reasons relied on in respect of each issue.

Check  if additional sheets are attached.

### Appointment of Representative

I confirm that \_\_\_\_\_ of \_\_\_\_\_

(name of individual) (name of organization)

at \_\_\_\_\_

(full address including postal code)

(      ) \_\_\_\_\_, has the authority to communicate on my behalf concerning this Notice of Objection.

(Telephone number including area code)

I authorize the Objections and Appeals Branch to collect personal information from and disclose personal information to my representative in accordance with the *Freedom of Information and Protection of Privacy Act*.

This **Notice of Objection** must be signed by the person objecting or an authorized representative. If an authorized representative signs this Notice of Objection, please submit written confirmation of authorization.

Name (print)	Signature	Date (yyyy/mm/dd)