

APPLICATION FOR A PARTNERSHIP'S FILER IDENTIFICATION NUMBER

- Use this form to apply for a partnership's filer identification number.
- We assign each partnership a unique filer identification number—a partnership can have only **one** filer identification number. If you change the name of the partnership, you should still use the original filer identification number.
- See our income tax guide called T4002, *Business and Professional Income*, for the list of NAICS codes you have to show in Section B in the area for "Partnership's principal business activity." The codes are in the Appendix Industry Codes.

See our income tax guide called T4068, *Guide for the T5013 Partnership Information Return*, for the list of codes you have to show in Section B in the area for "Jurisdictions where partnership operates." Appendix A has the codes for Canadian provinces and territories, and Appendix B has the codes for countries.

You can get these guides on our Web site at **www.cra.gc.ca/formspubs**, or by calling **1-800-959-2221**.

 About three weeks after you send us your completed application form, we will send a letter to the address on the form notifying you of the partnership's filer identification number. Use that number when you file your T5013 Partnership Information Return.

Do not use this area									
Partnership's filer identification number									
Partnership's filer identification number									

Canada

Section A – Identifica	tion ———					ר Section B – Additional information —
Fiscal period	Year M	onth Day	Year	Month	Day	Partnership's principal business activity: Enter the description that best describes the principal
Business Number						operation of the Partnership's principal business activity,
Dusiness Number						and provide the NAICS code.
						NAICS code
Partnership's name (please print)						Note : If the partnership's principal activity is non-business rental income from property, specify "rental income from property" and enter "531390" for the NAICS code.
Head office address						Jurisdictions where partnership operates:
City		Province or territ	tory Postal c	ode		
Country	State	U.S. zip code				
Is this a limited partnership?		(✓)	No 1	Yes	2	Is this, or will this be, a publicly traded partnership?
If yes, give the full name and add	ress of the principal general par	tner.				(✓) No 1 Yes 2
Principal general partner's name						Is this partnership a tax shelter?
Address						(*) No 1 Yes 2
City		Province or territ	tory Postal c	ode		If yes, enter the tax shelter identification number.
Country	State	U.S. zip code				
						Language for correspondence (

Gection C −

Person to contact for more information (please print)								
First name	Last name	Area code	Telephone number					
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Provide all the information we ask for, and send the completed form to:

Data Assessment and Evaluation Programs Division, Ottawa Technology Centre, 875 Heron Road, Ottawa ON K1A 1A2