Request to Reduce Tax Deductions at Source for Year(s)

- Use this form to ask for reduced tax deductions at source for any deductions or non-refundable tax credits that are not part of the Form TD1, *Personal Tax Credits Return*.
- All your income tax returns that are due have to be filed and amounts paid in full before you send us this form.
- You usually have to file this request every year. However, if you have deductible support payments that are the same or greater for more than one year, you can make this request for two years.
- Send the completed form with all supporting documents to the Taxpayer Services Division of your tax services office. You can find the
 address on our Web site at www.cra.gc.ca/tso or by calling us at 1-800-959-8281.
- We will write to you in four to six weeks to let you know if we have approved your request.

Identification															
First name	me	е							Social insurance number						
Address															
Province or territory Postal code Residence									Teleph						
	Hesi						Residence	sidence Business							
Employer/Payer	Contact person						Telephone and fax numbers								
Name															
Address															
Request to reduce tax on															
	Salary Lump sum* – if lump sum, give payment amount and details (for example, a bonus or vacation pay)														
<u>\$</u>															
* If you are using a lump sum amount for an RRSP and the amount is unknown, enter your expected RRSP contribution without exceeding your RRSP deduction limit.															
Deductions from income and non-refundable tax credits															
Registered retirement savings plan (RRSP)	contribu	ıtions						\$							
Give details or a copy of the payment arrang	ement c	ontract.													
 Do not include contributions deducted from y 	our pay	by your employe	r.												
Child care expenses									-						
Support payments															
Attach a copy of your court order or written agreement and Form T1158, Registration of Family Support															
Payments (if not previously filed). Recipient's name and social insurance numb	oer.														
•			Ι.,		I	-									
Employment expenses															
Statement of Employment Expenses. Statement of Employment Expenses. Statement of Employment Expenses. Statement of Employment Expenses.															
Carrying charges and interest expenses on investment loans \$															
Attach a copy of statements from the lender interest payments to be made in the year.	confirmi	ng the purpose ar	nd amou	int o	f the loan	ı(s)	and the								
								¢							
Other (for example, charitable donations or rental losses)															
Specify:															
		Total an	nounts t	n he	deducted	d fr	om income	\$							
Total amounts to be deducted from income															
Subtract income not subject to tax deductions at source (interest, net rental or self-employed income)									-						
Net amount requested for tax waiver									\$						
Certification															
	o roduco	my tay daduation	ne at cou	ıroo	haced or	ı th	e information	aivos	100	rtify th	at the				
I request authorization for my employer/payer to reduce my tax deductions at source based on the information given. I certify that the information given on this form and in any attached documents is correct and complete.															
	Signature)		_			Date			_					

