

Agence du revenu du Canada

DECLARATION OF CONDITIONS OF EMPLOYMENT

The employer must complete this form for the employee to deduct employment expenses from his or her income.

The **employee** does not have to file this form with his or her return, but must keep it in case we ask to see it. For details about claiming employment expenses, see Guide T4044, *Employment Expenses*, or Interpretation Bulletins IT-352, *Employee's Expenses, Including Work Space in Home Expenses*, and IT-522, *Vehicle, Travel and Sales Expenses of Employees*.

Part A – Employee information (please print)

Last name		rst name	Tax year	Social insurance number				
Hom	e address	Business address						
ПОПП	e address	business address						
Job t	tle and brief description of duties							
Dari	B – Conditions of employment							
ı aı	B - Conditions of employment							
1.	Did this employee's contract require the employee to pay his or he	er own expenses while carryin	ng out the duties of en	nployment? Yes	No			
	If no, the employee is not entitled to claim employment expenses	s, and you are not required to	o answer any of the	other questions.				
2.	Did you normally require this employee to work away from your pl	lace of business or in different	t places?	Yes	No			
	If yes, what was the employee's area of travel (be specific)?							
3.	Indicate the period(s) of employment during the year: from		to					
		(Year) (Month)	(Day)	Year) (Month) (D	ay)			
	If there was a break in employment, specify dates:							
	Did this employee receive a motor vehicle allowance?			Yes	No			
4.	If yes, indicate:							
	 the amount received as a fixed allowance, such as a flat month 	nly allowance \$						
	the per km rate used(\$/km), and the amount re							
	the amount of the allowance that was included on the employer							
	Did this employee have the use of a company vehicle?			Yes	No			
	, ,							
5.	Did this employee receive a repayment of the expenses he or she	e paid to earn employment inc	ome?	Yes	No			
	If yes, indicate the amount and type of expenses that were:	Amount		Type of expense				
	received upon proof of payment	\$						
	charged to the employer, such as credit card charges	\$						
	included on the employee's T4 slip	\$						
6.	Did you require this employee to pay other expenses for which the	e employee did not receive an	ny allowance or repay	ment? Yes	No			
	If ves, indicate the type(s) of expenses				_			
7.	Did you pay this employee wholly or partly by commission according to the volume of sales made or contracts negotiated?							
	If yes, indicate the commissions paid (\$) and the type of goods sold or contracts negotiated ().			
	Is there a business development account or other similar commission income account available from which the employee's employment expenses are paid or reimbursed?				No			
	If yes, is the commission income from this account included in box	x 14 of the T4 slip?		Yes	No			



8.	Did you require this employee to be away for at least 12 consecutive hours from the municipality and metropolitan area (if there is one) of your business where the employee normally reported for work? If yes, how frequently?					
9.	Did you require this employee under a contract of employment to:					
	 rent an office away from your place of business? pay for a substitute or assistant? (do not complete for employees earning commission income). pay for supplies that the employee used directly in his or her work? pay for the use of a cell phone? Did you or will you repay this employee for any of these expenses? Yes No Yes No)				
	If yes, indicate the type of expense and amount you did or will repay:					
10.	Did you require this employee under a contract of employment to use a portion of his or her home for work? The work space must be where the employee mainly (more than 50% of the time) does his or her work OR used only to earn the employment income and also used on a regular and continuous basis for meeting clients or customers. Yes No					
	Did you or will you repay this employee for any of the expenses? Yes No					
	If yes, indicate the type of expense and amount you did or will repay	-				
11.	Did you require this tradesperson, as a condition of employment, to purchase and provide tools after May 1, 2006, that were used directly in his or her work? No					
	If yes, do all of the tools itemized on the list provided to you by the employee satisfy this condition?					
	Please sign and date the list.					
12.	Did this employee work for you as an apprentice mechanic?					
	If yes, was this employee registered in a program established under the laws of Canada or of a province or territory that leads to a designation under those laws as a mechanic licensed to repair self-propelled motorized vehicles?					
13.	Did you require this apprentice mechanic, as a condition of employment, to purchase and provide tools that were used directly in his or her work?					
	If yes, do all of the tools itemized on the list provided to you by the employee satisfy the condition described in Question12?					
	Please sign and date the list.					
14.	Did this employee work for you as a forestry worker?					
	Did this employee, as a condition of employment, have to provide a power saw (including a chain saw or tree trimmer)? Yes No					
Employer declaration						
I certify that the information provided on this form is, to the best of my knowledge, correct and complete.						
	Name of employer (print) Name and title of authorized person (print)					
	Date Telephone Number Signature of employer or authorized person					
Note Please make sure that the name and telephone number of the authorized person are clearly printed in case we need to call to verify information.						