



**APPLICATION FOR PROPERTY TAX REBATE  
FOR REGISTERED CHARITIES AND SIMILAR ORGANIZATIONS  
PURSUANT TO COUNTY OF SIMCOE BY-LAW NO. 6104**

*This application is due the last day of February of the year following the taxation year to which the application relates.*

*Please ensure that the Landlord / Property Owner Declaration on the second page of this form is completed if the property is leased. This application consists of 2 parts, the applicant's declaration and the landlord's declaration, both of which must be fully completed (if applicable) prior to submission.*

**Name of Registered Charity** \_\_\_\_\_

**Attach proof of status as Registered Charity as defined in S. 248(1) of the Income Tax Act**

**(indicate type of document)** \_\_\_\_\_

**Revenue Canada Charitable Registration Number**

**Property Address** \_\_\_\_\_

**Name of Contact** \_\_\_\_\_

**Mailing Address (if different from above)** \_\_\_\_\_

**Telephone No.** ( ) \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_ **Email:** \_\_\_\_\_

<b>Annual Property Taxes Paid This Year</b>	\$ _____	"A"
<i>This amount should agree to Amount "A" on Property Owner Declaration</i>		
<b>Organization's Share of Rentable Space of Property</b>	_____ %	"B"
<i>This amount should agree to Amount "B" on Property Owner Declaration</i>		

I certify that the above information is true, correct and complete. I authorize the release by third parties of all information the County Treasurer or Local Treasurer may require to verify the accuracy of any information submitted with this application. I also acknowledge that I must inform the Local Municipality of any changes in the above which affects my eligibility for a rebate.

Signature of Signing Officer \_\_\_\_\_

Name and Title of Signing Officer \_\_\_\_\_

Date \_\_\_\_\_

Personal information is collected on this form per County of Simcoe By-law No. 6104 and will be used to determine eligibility for property tax rebates for registered charities.

If you have questions, contact the Treasurer at your local municipality.

**Submit the request to your Local Municipality:**

- Town of Bradford West Gwillimbury; Town of Collingwood; Town of Innisfil; Town of Midland; Town of New Tecumseth; Town of Penetanguishene; Town of Wasaga Beach; Township of Adjala-Tosorontio; Township of Clearview; Township of Essa; Township of Oro-Medonte; Township of Ramara; Township of Severn; Township of Springwater; Township of Tay; Township of Tiny.

*'This property tax rebate program is pursuant to and governed by County of Simcoe By-law No. 6104.'*



LANDLORD / PROPERTY OWNER DECLARATION FOR PROPERTY TAX REBATES

This application is due the last day of February of the year following the taxation year to which the application relates.

Name of Landlord / Owner \_\_\_\_\_ (please print)

Mailing Address \_\_\_\_\_

Telephone No. (\_\_\_\_) \_\_\_\_\_

Assessment Roll No. 43 \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Property Occupied by Registered Charity \_\_\_\_\_ (Full Address)

Table with 2 columns: Description, Amount. Rows include Total Annual Property Taxes Payable on Assessed Property, Total Annual Property Taxes charged to Charity this year, and Registered Charity's Proportional Share of Rentable Space of Property.

I certify that the above information is true, correct and complete. Signature of Landlord / Owner \_\_\_\_\_ Date \_\_\_\_\_ Name of Landlord / Owner \_\_\_\_\_

FOR OFFICE USE ONLY

Local Municipality: \_\_\_\_\_ Application No. [ ]

Taxation Year For Which Rebate is Requested: \_\_\_\_\_ Date Application is received: \_\_\_\_\_

Charitable Status Verified: \_\_\_\_\_

Amount Eligible for Rebate 40% x "A" \_\_\_\_\_ OR Amount Eligible for Rebate 100% x "A" \_\_\_\_\_

Distribution of Rebate:

Local Municipality \$ \_\_\_\_\_

County of Simcoe \$ \_\_\_\_\_

Education \$ Total \$ \_\_\_\_\_

Approved by \_\_\_\_\_

Date \_\_\_\_\_

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