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APPLICATION

TO THE COUNCIL OR ASSESSMENT REVIEW BOARD

Application Number

FOR ADJUSTMENT OF TAXES FOR THE . . . . . FOR THE YEAR . . . . . .

UNDER SECTION 357 ☐ OR SECTION 358 ☐ OF THE MUNICIPAL ACT, 2001, c. 25

Assessed Address	Roll Number Cty. Mun. Map Div. Sub-Div. Parcel Prim./Sub.
Name of Assessed Person	Telephone No.
Mailing Address of Assessed Person	Postal Code
Name of Applicant	Telephone No.
Mailing Address of Applicant	Postal Code

REASON FOR APPLICATION: *(CHECK APPROPRIATE BOX – **ONE** ONLY)*

- ☐ Ceased to be liable to be taxed at rate it was taxed - s. 357(1)(a)
- ☐ Became exempt - s. 357(1)(c)
- ☐ Razed by fire, demolition or otherwise - s. 357(1)(d)(i)
- ☐ Damaged by fire, demolition or otherwise - (substantially unusable) - s. 357(1)(d)(ii)
- ☐ Vacant or excess land - s. 357(1)(b)
- ☐ Sickness or extreme poverty - s. 357(1)(d.1)
- ☐ Mobile unit removed - s. 357(1)(e)
- ☐ Gross or manifest clerical error - s. 357(1)(f) or 358(1)
- ☐ Repairs/renovations preventing normal use for a period of 3 months - s. 357(1)(g)

DETAILS OF REASON . . . . . .

PERIOD TAX RELIEF CLAIMED: **From** . . . . . (Date) **To** . . . . . (Date)

Applicant's Signature . . . . . Date of Application . . . . . .

ASSESSMENT REPORT – MUNICIPALITY

Assessment roll as returned

Revised since roll returned Enter revisions below ☐

RTC/RTQ	..... Base-year CVA	..... Base-year CVA	Current Phased Assessment
Revised:			

Reason original assessment revised:

ASSESSMENT REPORT – MPAC

☐ No change in assessment ☐ Section 357 required for next year

Revised RTC/RTQ	Revised Base-year CVA	Revised Base-year CVA	Revised Current Phased Assessment	Change to Current Phased Assessment

Reason for change (MPAC comments):

MPAC Staff Name:

Signature:

Date:

REPORT ON TAX LIABILITY

RTC/RTQ	Taxable Realty Assessment Reduction	Tax Rate	Days	Months	Amount of Tax Adjustment	Original Tax Levy
☐ NO RECOMMENDATION FOR TAX ADJUSTMENT	☐ Reduction	☐ Cancellation	☐ Refund	TOTAL ➤		

Comments. . . . . .

Signature . . . . . Date . . . . . .

COUNCIL OR ASSESSMENT REVIEW BOARD – DECISION MADE UPON ABOVE APPLICATION

- ☐ APPROVED (Tax to be adjusted accordingly)
- ☐ AMENDED AND APPROVED (Tax to be adjusted accordingly)
- ☐ NOT APPROVED
- ☐ APPLICANT DID NOT APPEAR
- ☐ APPLICATION ABANDONED

REASON: . . . . . .

Appeared for Applicant . . . . . Appeared for Municipality . . . . . .

Date of Hearing . . . . . .

Signature of Secretary or Board Clerk . . . . . Signature of Council Rep. or ARB Member . . . . . .

The information on this form will be used for the purpose of processing tax applications filed under the *Municipal Act, 2001*, c. 25, ss. 357 and 358. Questions regarding the collection of personal information should be directed to the Municipal Clerk or the Freedom of Information and Privacy Coordinator of the municipality.

ORIGINAL - Council or Assessment Review Board COPY - MPAC COPY - Applicant COPY - Treasurer