



## Tax Rebate Application for Eligible Charities

*(This is a yearly Tax Rebate Program and for a given year must be filed with our Office no later than 4:30pm on the last day of February in the subsequent year)*

### Registered Charitable Organization

Name of Organization \_\_\_\_\_

Canada Revenue Agency Registration Number \_\_\_\_\_ (i.e. BN xxxxx xxxx RR0001)

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail Address \_\_\_\_\_

***I have the authority to bind this Charitable Organization and to certify that the information contained herein is true and correct.***

Name (print) \_\_\_\_\_ Position \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Property Occupied (by the above named registered charitable organization)

Property address \_\_\_\_\_ Roll Number \_\_\_\_\_

Date of occupancy if less than one year \_\_\_\_\_ Total square footage of building \_\_\_\_\_

**“Owner” of the property:**

Are you occupying the whole property? yes  no

If not, how much leasable space is occupied by others? \_\_\_\_\_ (Sq. Ft.)

**“Tenant” of the property:**

Lease expiry / renewal date \_\_\_\_\_ Total square footage occupied \_\_\_\_\_

Are you sub-leasing space? yes  no  If yes, how much space \_\_\_\_\_ (Sq. Ft.)

Monthly rent \$ \_\_\_\_\_ Monthly proportionate share of property taxes \$ \_\_\_\_\_

*(Note: The above property tax amount must not include other fees such as HST)*

### Landlord Confirmation

Name \_\_\_\_\_ Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail Address \_\_\_\_\_

***I have the authority to certify that the leased property information contained herein is true and correct.***

Name (print) \_\_\_\_\_ Position \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Rebate amount

The organization is applying for the eligible rebate amount of 40% of the taxes or amounts on account of taxes paid by the organization on eligible property or portion of eligible property occupied.

The organization is applying for a rebate amount that is greater than the eligible rebate amount of 40% of the taxes or amounts on account of taxes paid by the organization on eligible property or portion of eligible property occupied. Rebate amount applied for is \_\_\_\_\_% of the taxes.

***Return completed form to: Town of Iroquois Falls, 253 Main Street, PO Box 230, Iroquois Falls, ON P0K 1G0***