



TAX INCENTIVE PROGRAM APPLICATION

Date: _____

Name of Property Owner (as per tax roll)			
Contact Name:			
Mailing Address:	City/Town/Village:	Province:	Postal Code:
Telephone Number (Main):		Telephone Number (Alternate):	
Email Address:			

Legal Description of Lands for Tax Exemption:		
Details of the Proposed Development:	Estimated Assessed Value of the New Building/Improvement:	Number of Full-Time Employees:

I/we, the undersigned, understand the conditions of eligibility and further terms set out in Bylaw #19.19, and acknowledge I/we have authority to request taxation exemption on the above-mentioned property.

Full Name

Signature

Full Name

Signature

Office Use Only:

Roll Number:	Development Permit #:	Development Permit Issue Date:	Development Completion Date:
Previous Assessment:	Current Assessment:	Approved By:	