Tax Rebate Program Application

for Low-Income Seniors and Low-Income Persons with Disabilities City of Mississauga
Finance Division
300 City Centre Drive
Mississauga, Ontario L5B 3C1
Tel: 3-1-1 or 905-615-4311 (outside city limits)
TTY: 905-896-5151 (teletypewriter)
Email: tax@mississauga.ca



Personal information on this form is collected under the authority of City of Mississauga By-law 56-10 as amended and will be used to process your application. Questions about the collection of this personal information should be directed to the Customer Service Advisor at the City's Citizen Contact Centre. Email: Public.Info@mississauga.ca or Telephone: 311 (905-615-4311 outside City limits).

| Current Tax Year: 20 | | | |
|---|---------------------|--|--|
| The City of Mississauga provides a tax rebate to qualified low-income seniors and low-income persons with a disability. Applications must be submitted by December 31st the current taxation year. NOTE: Applications will be processed following confirmation of the annual rebate amount which occurs in May with the approval of the final tax rates. SEE REVERSE FOR ELIGIBILITY CRITERIA | | | |
| TAX ROLL # 2 1 - 0 5 | | | -0000 |
| Name of Owner | Date of Birth (yyyy | -mm-dd) | Present Address |
| Name of Spouse | Date of Birth (yyyy | -mm-dd) | Previous Address (only if less than one year at present address) |
| Additional Non-Spousal Owner(s) (if applicable) | Date of Birth (yyyy | -mm-dd) | audi oco, |
| Phone Number | Email Address | | |
| Seniors in Receipt of Guaranteed Income Supplement (GIS) - Please select applicable boxes: I/We occupy the property described above as my/our "principal residence" and have not claimed a tax rebate in respect of any other property for the year in which this application is made. As owner/spouse (as defined under Part III of the Family Law Act) am/we are sixty-five (65) years of age or older and receive the Guaranteed Income Supplement and I/we authorize Service Canada to release to the City of Mississauga such information as will verify my receipt of the Guaranteed Income Supplement. I/We have included a copy of my/our T4A (OAS) slip for the year prior to the current tax year. Owner's Social Insurance Number (SIN): | | | |
| Spouse's Social Insurance Number (SIN): | | | |
| Additional Non-Spousal Owner's Social Insurance Number (SIN) (if applicable): | | | |
| Persons with Disabilities in Receipt of Ontario Disability Support (ODSP) - Please select applicable boxes: | | | |
| [] I/We occupy the property described above as my/our "principal residence" and have not claimed a tax rebate in respect of any other property for the year in which this application is made. | | | |
| As owner/spouse (as defined under <i>Part III of the Family Law Act</i>) I/we are in receipt of an allowance, benefit or income support as a disabled person(s) under the <i>Ontario Disability Support Program Act</i> . | | | |
| I/We authorize the Ministry of Community and Social Services to release to the City of Mississauga such information as will verify receipt of an allowance, benefits or income support as a person with a disability under the Ontario Disability Support Program Act. | | | |
| Owner's ODSP Member ID: | | | |
| Spouse's ODSP Member ID: | | | |
| | | | |
| Stormwater Charge Subsidy: Applicant(s) in receipt of the Tax Rebate will automatically qualify for the Stormwater Charge Subsidy. Single Family Homes will receive the Subsidy on the Region of Peel Water/Wastewater/Stormwater bill. Condominiums will have a separate cheque mailed to them from Environmental Services at the City of Mississauga. Please contact 311 or 905-615-4311 (if outside City limits) for more information. | | | |
| I/We certify that the information on this form and any applicable attachment(s) are true and correct: | | | |
| Signature of Owner | | | Date |
| Signature of Spouse | | | Date |
| Signature of Non-Spousal Owner (if applicable) Date | | | |
| For Office Use Only - GIS | | For Offic | e Use Only - ODSP |
| Owner in receipt of GIS: Yes No Spouse in receipt of GIS: Yes No | es No | Owner is Owner in Spouse is Spouse in Additional Additional | disabled: |
| | | Dato: | , or a stoom voinging. |

Comments:

Comments: _

Low-Income Seniors and Low-Income Persons with Disabilities Tax Rebate Program

Eligibility Criteria

- FD $OF_{A}^{A} = a_{A}^{A} A_{A}^{A} = A_{A}^{A} =$

 - àD ^ $[a^*]^{A_{1}}$ å $[a^*]^{A_{2}}$ å $[a^*]^{A_{2}}$
- GD CE,Ár,}^¦ÁnaÁna)Án|atāna|^Ár,}^¦Ár,¦Ár,¦Ár@Ár,*}][•^Ár,Ár@ÁÓ°Ëpæ,Ána;
 - $adD \qquad c@A_{1} ^{\dagger} \cdot A_{1} ^{\dagger} \cdot A_{2} ^{\dagger} \cdot A_{1} ^{\dagger} \cdot A_{2} ^{\dagger} \cdot A_{1} ^{\dagger} \cdot A_{2} ^{$
 - àD $c@A_1^{\bullet}[]A_2^{\bullet}A_3^{\bullet}$
- HD CZÁ,¦[]^¦ĉÁsaÁsa)Á^|ðãa|^Á,¦[]^¦ĉÁ(¦Ás@Á,`¦][•^•Á,Æó@ÁÓ˚Ë;æ,Á,@a&@Á;¦Á,Æ,@a&@K
 - æÐ -{ | Áx@ Á, ˇ |] [• ^• Á; -Áx@ ÁOE• ^•• { ^} OÁOEOÉE Á&|æ• ãã Á\$; Áx@ Á.^• ãã ^} cãæ|Á; | Áæ|{ Á; | [] ^ | c Á&|æ• LÁæ) å Á
 - àD \tilde{a} Ác@ ÁN dã & a A \tilde{a} & A & A \tilde{a} & A &
 - 8D $^{\circ}$ C^\\^\(\hat{A}\)\(\hat{
- - æÐ &[}dājˇ[ˇ•|^Á[¦ÁsæÁ,^¦ā[åÁ,-Á,[dÁ^••Ás@æ)Ás@^^Á^æ•Á;¦Á
 - àD within a relationship of some permanence if they are the] \$\approx^1 \frac{\hat{\pi}}{\pi} \frac{\hat{\pi}

BCH9. For GIS recipients, a copy of your H(5 'fC5 GL'g`]d'reflecting payments in Box 21 must be submitted k]h 'mci f` Udd`]WUficb"9I Ua d`Y. : cf'h Y' 8\$25 application year, the 2024 T4A (OAS) slid]g'fYei]fYX"

K\YfY'N Y'dfcdYflmi]g'ck bYX'Vma cfY'N Ub'cbY']bX]j]Xi U'žk\YfY'Ub'ck bYf']g'bchU'gdci gYžN Uh']bX]j]Xi U'a i ghei U]ZmZcf'N Yff'cb'N Yff'ck b'a Yf]hUg'Ub'Y][]V'Y'dYfgcb"

- $\nabla \vdash [A_1[\cdot \land A_2] \land A_3] \mid a = A_1 \land A_2 \land A_3 \land A_4 \land A_4 \land A_4 \land A_4 \land A_4 \land A_4 \land A_5 \land A_4 \land A_5 \land A_6 \land A_6$
- $\nabla \quad \text{OE} \text{ \hat{A} adj} \text{ $|\hat{A}$ adj} \text{$
- ∇ V@Á^àæe^Á¸@}Áæj]¦[ç^åÁ¸ã|Áà^Á&¦^åãe^åÁq[Áo@Áæj]|ã&æ)œpÁ;|[]^¦c`ÁææeÁæ&&[`}œÁ¸ão@`óÆjæ'\^•œÈ
- ∇ Šææ^Ájæê{ ^} oÁs@æd* ^• Ás@ædÁ@æç^Ása^^} Áseþ] |ð³ å Át[Ás@Áseþ] |ð8æð; œpÁ; [] ^¦ ĉ ÁææcÁsæ8&[ˇ} oÁs Ásæåçæð; 8^Á; Ás@Án^àææ^Á@æçð; * Á
 à^^} Ásl^åãrå áÁt[Ás@Ásæ8&[ˇ} oÁ¸ ∄|Á, [oÁs^Ásæð; 8×||^å ÉÁn^àˇ 8*å Á; ¼^~ˇ} å^å È

5 dd`]WUrjcb'Zcfa g'UbX'gi ddcfljb['XcW a Ybrg'can'VY'gi Va]lhYX in any of the following ways.

- ∇ Email to tax@mississauga.ca (the original application is not required)
- ∇ Mail to Mississauga Taxes, 300 City Centre Drive, Mississauga ON L5B 3C1
- ∇ Fax: 905-615-3972
- Drop box: Located outside the Civic Centre, to the right of the North Entrance on Princess Royal Drive, or in the drop box located on the ground floor

The deadline for submitting an application is **December 31st** of the current taxation year. Applications received after the deadline will not be considered.

Applications submitted via email will receive an automatic reply as well as emails confirming that a service request was created and subsequently resolved. These emails will serve as confirmation that your application has been received. **Applications submitted via regular mail will not receive an automatic confirmation.** To confirm your application has been received, consider submitting your application via email or through registered mail. Alternatively, you may call 3-1-1 or 905-615-4311 (outside City limits) to receive a verbal confirmation.

Should there be a sale within the year of the application, please contact the Citizen Contact Center to provide a new mailing address.

Applications will be processed following confirmation of the annual rebate amount which occurs with the approval of the final tax rates in May of each year.

 $\begin{array}{l} \text{CI}_{1}^{1} | \text{asca}_{1} \text{ of } \triangle \text{acc}_{2} \text{ of } \triangle \text{acc}_{3} \text{ of } \triangle \text{acc}_{4} \text{ occ}_{4} \text{ occ$

- HËËËÁ, ¦ÁJ€ÍË FÍË HFFÁÇÃÁ, *œãã^ÁÔãĉ Áã, ãæ)
- VVŸKÁJ€ÍËJÎËFÍF
- Ò{æãihÁæ¢O{ã•ã•æ**æiðæáÁ