

# Letter of Direction for Refund of Property Taxes

City of Mississauga  
Mississauga Taxes  
300 City Centre  
Mississauga, Ontario L5B 3C1  
Tel. 3-1-1 or 905-615-4311\*  
\*outside city limits  
mississauga.ca/tax



Personal information on this form is collected under the authority of *Municipal Act 2001, SO 2001, c.25* 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](mailto:Public.Info@mississauga.ca) or Telephone: 311 (905-615-4311 outside City limits).

## Section 1: Property Tax Account and Current Owner Information

Re: Tax Roll Number

0 5 -  -  -  -  -  - 0 0 0 0

Property Location

Name of Current Assessed Property Owner(s)

Name of Current Owner's Authorized Representative (if applicable)

*If the owner is a business, their representative must have the authority to bind the organization*

Authorized Representative's Relationship to Current Owner and/or Job Title

## Section 2: Direction

I/We

*Name(s) of the Current Owner or the Current Owner's Authorized Agent*

**hereby authorize the City of Mississauga to issue a refund in the amount of**

*Exact Dollar Amount*

To

*Name(s) of Refund Recipient(s)*

This Refund Amount is the result of (select one reason)

**Appeal** (*specify type of appeal i.e. RfR, ARB etc. and the appeal year(s)*)

**Overpayment on Account**

**Payment Made in Error**

**Other** (*please specify*)

**NOTE:** In accordance with the City of Mississauga's [User Fees and Charges By-law](#), a \$30 Refund Request Fee, plus H.S.T. will be deducted from any refund amount issued. The exception to this fee is refund requests that are the result of Tax Adjustments processed under Section 357/358 of the *Municipal Act*.

The refund cheque should be addressed and mailed to the recipient as follows:

**Recipient's Name(s)**

### Recipient's Mailing Address

**Signature** (I/We have the authority to bind the organization)

Date (MM-DD-YY)

## Phone Number

Email Address

## Form Instructions

To proceed with your refund request, please print, sign and date your completed form and forward it to the City of Mississauga Tax Office by one of the following methods:

- **Mail** City of Mississauga Tax Office  
300 City Centre Drive, 11th Floor  
Mississauga, ON L5B 3C1
- **Email** tax@mississauga.ca
- **Drop Box** Mississauga Civic Centre  
300 City Centre Drive  
(External Drop Box is located to the right of the North Entrance,  
on Princess Royal Drive, or inside the Civic Centre by the  
Welcome Desk)

## PRINT