Charity Tax Rebate Application

City of Mississauga
Finance Division
300 City Centre Drive
Mississauga, Ontario L5B 3C1
Tel: 3-1-1 or 905-615-3411 (outside City limits)
TTY: 905-896-5151 (teletypewriter)
Email: tax@mississauga.ca

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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 Charity Rebate 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).

For Registered Charities Occupying Commercial and/or Industrial Property

The tax office must <u>receive</u> this form by the last day of February following the tax year you are applying for. If you apply before the tax year ends, wait until the final tax bill has been issued before submitting your form. Complete all sections of this form as incomplete applications will take longer to process.

Calendar Year Rebate Applies

Name of Registered Charity

Address for which Rebate Applies

Unit(s)

Postal Code

Contact Name

Contact Phone No.

Contact Email Address

Total Length of Occupancy at above Address

Charity's Mailing Address

Postal Code

Canada Customs and Revenue Agency Registration/Business No.

Landlord Declaration (to be completed by the Landlord)

Registered Owner/Company Name (print)

Property Tax Roll Number

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Property Class for Property Occupied and Used by the Charity

☐ Commercial ☐ Industrial

Total Annual Property Taxes Payable $

Total Property Taxes Paid by Charity (do not include GST) $

Charity Proportionate Share of Rentable Space of Property %

*** Please note: If Charity's length of occupancy at present address is less than one (1) year, complete below:**

From (YYYY MM DD)

To (YYYY MM DD)

I, the undersigned hereby certify that the information is true and complete. I understand false or deceptive statements may nullify eligibility and require repayment of the rebate.

Landlord or Property Manager Name (print)

Landlord or Property Manager Signature

Date (YYYY MM DD)

Contact Telephone No.

Contact Email Address

Charity Declaration (to be completed by the Charity)

I, the undersigned hereby certify that the information is true and complete to the best of my knowledge and belief. I understand false or deceptive statements may nullify eligibility and require repayment of the rebate.

Name of Authorized Officer (print)

Title of Authorized Officer

Signature of Authorized Officer

Contact Email Address

Contact Phone No.

Date (YYYY MM DD)

The applicant agrees that the charity rebate is subject to the *Municipal Act, 2001* and the Regional Municipality of Peel By-law Number 72-2007 (Regional tax rebate to registered charities by-law), as amended. Any changes to the property's assessment for the taxation year for which this application is made, will result in a recalculation of the rebate amount.

For Office Use Only

Verification of Property Commercial or Industrial ☐ Yes ☐ No

Verification of Registered Charity Status ☐ Yes ☐ No

Total Annual Property Taxes $

Paid by Charity $

Rebate Entitlement (40%) $

Recalculation $

Balance Payable (Recoverable) $

Appeal(s) ☐ Yes ☐ No If yes, year(s)

Completed By

Date (YYYY MM DD)