

## Schedule "A" to County of Peterborough By-law No. 2022-24

## Application Form for Relief of a Residential Tax Increase For low-income Seniors and low-income Persons with Disabilities

This form is to be completed by applicant. P	lease refer to	By-law No. 2022-24 f	or
Eligibility Criteria.			
lame:		Date:	
Address:			
Telephone Number:	Tax Year:		
Legal Description of Subject Property:			
Lot Concession	Plan	Part	
Municipality:			
Roll Number:			
Current year taxes			_ Line 1
Prior year taxes			_ Line 2
Tax Increase		(line 1 minu	_ Line 3 us line 2)
Amount eligible for Relief to a maximum of \$	200.00		Line 6

(Line 3 or \$200, whichever is less)

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1. Are you receiving a benefit paid under the Ontario Disability Support Program Act, 1997?

 $\mathsf{Yes} \Box \mathsf{No} \Box$ 

(If yes, evidence of benefit must be submitted with the application form.)

2. Are you receiving payments under the Guaranteed Income Supplement (GIS) as established under Part II of he Old Age Security Act (Canada); or who is in receipt of financial assistance under the Ontario Works Act, 1997 during the base year or the subject year?

 $\mathsf{Yes} \Box \mathsf{No} \Box$ 

(If yes, evidence of benefit must be submitted with the application form.)

 Are you the eligible person of above noted property and have owned it since December 31 or the 2<sup>nd</sup> year previous to the taxation year? (Example; for tax relief in 2022, property must be owned on December 31, 2020. For tax relief in 2024, property must be owned on December 31, 2022.)

Yes 🗆 No 🗆

(If yes, evidence of benefit must be submitted with the application form.)

4. Is the above-noted property your principal place of residence? ("Principal residence" means a residence that is occupied by an eligible person for a minimum of eight (8) months per year.)

Yes 🗆 No 🗆

5. Have you or another eligible person made an application for tax relief for more than one (1) single family dwelling unit in any year?

Yes 🗆 No 🗆

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Solemn Declaration			
I/We,	, of the Township of		
	, in the eclare that all of the statements contained in this solemn declaration as if made under oath and		
(Severally) Declared before me at the of , in the County of Peterborough, this day of, 20 A Commissioner for taking Oaths And Affidavits	Owner Owner		
For O	ffice Use Only:		
Denied			
Comments:			

Signature of Lower Tier Treasurer