

Applications must be received by **4:30PM, August 1, 2023**

**1. IDENTIFICATION OF APPLICANT:**

Organization name: \_\_\_\_\_

Are you registered under the *Societies Act*?     Yes                       No

Are you a registered charity?                       Yes                       No

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Preferred method of application reminder:     Email                       Mail

**2. PROPERTY (complete a separate form for each property)**

Folio Number: \_\_\_\_\_ Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Registered Owner (if different than above): \_\_\_\_\_

**3. ABOUT YOUR ORGANIZATION:** Please provide a brief description of the goals and objectives of the organization. (You may type and attach detailed responses in Microsoft word)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**4. PRINCIPAL USE OF THIS PROPERTY:** Please provide a brief description of the principal use of the property and how this use benefits the community

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**5. COMMERCIAL ACTIVITY:** Please provide a brief description of any commercial activities that your organization conducts on this property.

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**6. CATEGORY:** Please select the applicable permissive tax exemption category for which you are applying (for further explanation of permissive tax exemption categories contact Sean Strang at 250-378-8635).

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|---|---|
| <input type="checkbox"/> Social Service       | <input type="checkbox"/> Arts & Cultural Facility       |
| <input type="checkbox"/> Place of Worship     | <input type="checkbox"/> Athletic/Recreational Facility |
| <input type="checkbox"/> Property             | <input type="checkbox"/> Other: _____                   |
| <input type="checkbox"/> Educational Facility |   |
| <input type="checkbox"/> Supportive Housing   |   |
| • Temporary or transitional housing           |   |
| • Treatment program                           |   |
| • Permanent facility                          |   |
| • Supportive staff                            |   |
| • Group home                                  |   |
| • Special needs/disability housing            |   |

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**7. PUBLIC ACKNOWLEDGEMENT:** All recipients of City of Merritt permissive tax exemptions are required to publicly acknowledge the exemption. How does your organization plan on publicly acknowledging the exemption?

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**8. FINANCIAL STATEMENTS:** Attach your most recent financial statements.

**9. PROPERTY OWNERSHIP:** Do you plan on selling any portion of the property during 2022?

Yes

No

**10. DECLARATION:**

I am an authorized signing officer of the organization and I certify that the information given in this application is correct. Should a permissive tax exemption be granted on the above listed property, I am agreeable to the following terms:

- If the property is sold prior to the exemption expiration, the organization will remit to the City an amount equal to the taxes that would have otherwise been payable to the City by a non-exempt owner.
- The property use will be in compliance with all applicable municipal policies and bylaws.
- The organization will publicly acknowledge the permissive tax exemption granted by the City.

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Signature

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Position

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Name (please print)

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Date