



Application for Tax Exemption for Non-Profit Organizations in 2010-2011



PO Box 1749
Halifax, Nova Scotia
B3J 3A5 Canada

Application Deadline: November 30th, 2009

Name of Organization:	Contact Person: Telephone: Fax:
Mailing Address:	Civic Address of Property:
NS Registered Joint Stock Number:	
Federal Charitable Number:	
Act of Legislature, Name and Date of the Act:	

Please indicate if this is a Renewal or New Application.

- Renewal** - Currently on by-law: no change in number of properties or location
- Renewal** - Currently on by-law: applying to add an additional property
- Renewal** - Currently on by-law: request increase in level of exemption
- New Application** - Not on by-law: applying for tax exemption for the first time

Please include the following information with your application.

It is the organization's responsibility to ensure HRM has current contact information on record.

- Updated list of the Board of Directors** with name, address and telephone number.
- Prior year's **financial statement** or Treasurer's report.
- Program reporting** - tell us who you are and what you do.
- Sign** the application form (two signatures required).
- If this is a new property management agreement or leased property, please ensure a copy of the lease is submitted so that HRM can verify that taxes are billed to the organization. Expired or inactive management agreement/lease may be declined.
- To protect client safety, if your organization is an emergency shelter, please note on the form so that the civic address will not be used in public reports.

If your organization has outstanding debt to Halifax Regional Municipality, in excess of the current year, a decision on your eligibility to the program will be deferred until an active payment plan is in place. Active means payments on a regular schedule as approved by HRM Finance. Debt includes outstanding taxes, fines, fees, capital debt, rent, etc.

Please complete the appropriate section for your organization.

Renewal - Currently on by-law: no change in number of properties, location/civic address or ownership	
<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant
<input type="checkbox"/> Conversion from Commercial Tax Rate to Residential Rate	
<input type="checkbox"/> Reduction in Residential Tax Rate to (circle one): 50%, 75%, or 100% exempt	
<input type="checkbox"/> Reduction in Residential Tax Rate for Affordable Housing: 25%	

Renewal - Currently on by-law but applying to add an additional property	
<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant
Renewal Civic Address:	
New Property:	

Renewal - Currently on by-law but requesting an increase in level of exemption	
<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant
If you are applying to increase your exemption level, please indicate percentage requested as well as rationale for increase in your cover letter. Currently, _____% increase to _____% requested.	
<i>Please note: This section is only to be completed if your organization is currently on By-Law T-200.</i>	

New Application - Not on by-law, applying for tax exemption for the first time	
<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant
<input type="checkbox"/> Conversion from Commercial Tax Rate to Residential Rate	
<input type="checkbox"/> Reduction in Residential Tax Rate to (circle one): 50%, 75%, or 100% exempt	
<input type="checkbox"/> Reduction in Residential Tax Rate for Affordable Housing: 25%	

Civic Address of Taxable Property: Please list all properties below or on a separate page, by civic address and Assessment Account Number(s):

Current Tax Classification:

- | | |
|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Resource |
| <input type="checkbox"/> Residential | <input type="checkbox"/> Other |

Description of Property Assessed for Tax: Vacant land, building with lot, building, etc.

Registered Owner of Property: The name that appears on the property deed

Sector: See program newsletter for description

- | | |
|--|--|
| <input type="checkbox"/> Environment | <input type="checkbox"/> Service Club |
| <input type="checkbox"/> Sport/Recreation/Leisure | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Health | <input type="checkbox"/> Heritage, Historical Attractions and
Community History |
| <input type="checkbox"/> Affordable Housing | <input type="checkbox"/> Arts & Crafts |
| <input type="checkbox"/> Emergency Assistance | <input type="checkbox"/> Ethnocultural |
| <input type="checkbox"/> Shelters and Transitional Housing | |

Authorization

This application must be signed by an authorized signing officer of the Board of Directors:

Application prepared by: _____
Signature Print Name Date

Board Authorization: _____
Signature Print Name Date

Remember the Deadline for Applications is on or before November 30th, 2009.

Mail your application form to:

Halifax Regional Municipality
ATTN: Grants Program, Community Development
P.O. Box 1749
Halifax, NS B3J 3A5

Or drop off your application form to:

Halifax Regional Municipality
Grants Program, Community Development
40 Alderney Drive, 2nd Floor
Halifax, NS B2Y 2N5

All applications are date-stamped upon receipt. Due to the number of applications received each year, late applications are reviewed after on-time applications. If you need help with your application you may call the Grants Program at 490-7191 or 490-5469.

Time-frame: The review and approval process usually takes 1 year from application date.

All amounts owed to Halifax Regional Municipality are to be paid until notified of the status of your application.

