HALIFAX Tax Relief for Non-Profit **Organizations Program** Application, 2017-2018

Administrative Order 2014-001-ADM

Name of Organization:	Contact Information:	
	Name:	
Mailing Address:	Telephone:	
	Fax:	
	Email:	
Registration: An applicant must be incorporated under one of the following:		
Registered under Societies Act (Nova Scotia Registry of Joint Stock Companies)		
 Registered non-profit cooperative under Nova Scotia Co-Operatives Associations Act (Nova Scotia Registry of Joint Stock Companies) 		
 Registered non-profit corporation under the Corporations Canada Not-for-Profit Corporations Act (Industry Canada) 		
Registered charity under the Income Tax Act (Canada) (Revenue Canada)		
Registration Number(s):		
Incorporated under an Act of the Nova Scotia Legislature: If you are applying for acceptance into the program and your organization is incorporated as a non-profit under an Act of the Nova Scotia Legislature include a copy of the Act with this application form.		
Please indicate if this is a renewal, an application for addition to the program, or an application from an organization accepted into the program applying to add a property. Check the applicable box:		

If you need help completing this application form contact Grants & Contributions office at 902.490.7191 or email: nonprofittax@halifax.ca

☐ **Renewal:** Organization has been accepted into the program: no change in number of properties.

□ **New Application:** Not in program: applying for tax relief.

☐ **Addition:** Organization has been accepted into the program and is applying to add another property.

1. Renewal Applicants

Application deadline March 1, 2017.

Please complete this page if your organization is currently receiving tax assistance through the Tax Relief for Non-Profit Organizations Program.

□ Owner □ Leased		
Current Level of Tax Relief		
□ 25% Reduction at Residential Rate (Schedule 30)		
□ Conversion from Commercial to Residential Tax Rate (Schedule 29)		
□ Conversion from Commercial to Residential Tax Rate with % Reduction (Schedule 28 or 27)		
☐ Exemption (Schedule 26)		
Civic Address and Assessment Account Number of the Property:		
Mandatory Information: Attach a copy of your 2016 financial statement.		
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2. Addition Requested/New Applicant		
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Mandatory Information:	
☐ Proof of property ownership (eg. deed)	
☐ If applicable, copy of signed lease agreement	
☐ A financial statement for the prior fiscal year showing all revenue, expenses, assets and liabilities	
☐ Copy of last Notice of Assessment or tax bill	
☐ If applicable, the name and registration number of any non-profit tenants (include copy of lease)	

Freedom of Information and Protection of Privacy

An application made to the Tax Relief for Non-Profit Organizations Program is part of the public review process and may be subject to access requests under Freedom of Information and Protection of Privacy legislation. Applicants will be notified by HRM should such a request be received in relation to their application or an award decision.

Authorization

The applicant for tax relief certifies no party other than the applicant has any right (whether through lease, sublease or assignment) to occupy the real property for which tax relief is sought. This application must be signed by an authorized signing office of the Board of Directors. Application prepared by: Signature Print Name Date Board authorization: Date Signature Print Name Mail this application form to: Halifax Regional Municipality Grants Program: Non-Profit Tax Relief Finance & ICT PO Box 1749 Halifax, NS B3J 3A5 Or drop off the application at any HRM Customer Service Centre. If delivery is by courier keep proof of delivery receipt.

Keep a copy of your application for your records.

FOR OFFICE USE ONLY	
Date Received:	Initials:
☐ Complete: proceed to Review of Application	
□ Incomplete	
□ Hold	
□ Decline – State Reason	