

Please complete this application and attach a copy of your complete Income Tax Return and a photocopy of your Ontario Tax Credits that were claimed, along with photocopies of the payment stubs from the GAINS or ODSP cheques and and mail or fax to the City of Pickering, Taxation Section, One The Esplanade, Pickering, ON L1V 6K7, Telephone 905.420.4614, Fax 905.420.5313, Email propertytaxes@pickering.ca

Deferral Amount

The amount that qualifies for a tax deferral is limited only to the assessment related tax increase shown on Schedule 2 of the Final Tax Notice of the principal residence of the applicant or spouse of the applicant. The Eligible deferral amount is that part of the assessment-related tax increase that is in excess of the first 5% of the assessment-related increase or one hundred dollars (\$100.00), whichever is greater.

Seniors

For the purpose of this application, a Low Income Senior is defined as a person who is 65 years of age or older, and who is eligible to receive payment under the Guaranteed Income Supplement, or the Guaranteed Annual Income System (GAINS). The applicant or spouse of the applicant must have owned the subject property for at least one year before the date of the application.

Persons with Disabilities

For the purposes of this application, a Low Income Disabled person is a person who is eligible to receive payment under the *Ontario Disability Support Program Act* (ODSP), or the Guaranteed Annual Income System (GAINS). The applicant or spouse of the applicant must have owned the subject property for at least one year before the date of the application.

Please note: Deferred amounts represent a lien against the property, under provisions established under Section 319 of the *Municipal Act*, and must be repaid when the property is sold or a change in ownership occurs.

First Name Last Name

Name of Spouse Telephone #

Property Address Unit #

City Province Postal Code

Tax Roll # Purchase Date

Date of Birth

Statement of Income (Gross income as reported on income tax form for previous year)

Applicant's Gross Income # of Dependents

Spouse's Gross Income

Statement of Assets (Value of all other assets)

Real Estate Holdings (Applicant/Spouse)

Other Assets (i.e., cottage, property holdings)

I certify, to the best of my knowledge, that the information provided on this application is correct. If any benefits received from this application were accepted under false pretenses, the total amount shall be revoked and recovered by whatever means deemed necessary by the City of Pickering. I also acknowledge that the deferral amount represents a lien against the property listed above, and must be repaid when this property is sold or changes ownership. I hereby authorize the City of Pickering to take any means required to verify all the information provided in this application.

By signing this application, I/we acknowledge that I/we have read and understand all conditions.

Name of Authorized Officer

Signature

Date

Office Use Only

Roll # _____	Assessment Related Increase _____
20 _____ Annualized Taxes _____	Less (Greater of 5% or \$100.00) _____
20 _____ Taxes (copy of Schedule 2) _____	Amount Eligible for Deferral _____

Personal information contained on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*. This information is collected to complete the Low Income Seniors and/or Persons with Disabilities Tax Deferral Application. Any questions related to the collection of this information should be directed to the City Clerk, One The Esplanade, Pickering, ON L1V 6K7, 905.420.4611.

Alternate formats available upon request at 905.683.7575.