

Please complete and submit the original sworn affidavit, including all supporting documentation to the City of Pickering, Taxation Section, One The Esplanade, Pickering, ON L1V 6K7. For information concerning the use of this form, please contact the Taxation Section at Telephone 905.420.4614, Fax 905.420.5313, or email [property taxes](mailto:property_taxes@pickering.ca).

I, (insert first and last name)   
of the Town/City of , Ontario, make oath and say as follows:

**Conditions**

1. I am the Owner **or** I am the  [specify title held within Owner corporation] of the Owner of the real property (the "Property") municipally known as  Assessment Roll #  and as such have knowledge of the matters set out in this Affidavit. If the Owner is a corporation, I have the authority to bind the Owner with respect to all matters pertaining to its application for a Vacant Unit Rebate.
2. If the Property consists of a portion of a building, the Property is clearly delineated or separated by physical barriers from any portions of the building that are used.
3. The Property was vacant from  to , inclusive (the "Rebate Period"). [specify vacancy period - must be at least 90 days].
4. No part of the Property was used on a seasonal basis at any time during the taxation year in which the Rebate Period occurs.
5. No part of the Property was leased to any tenant within the Rebate Period. Any previous lease of the Property has been terminated in accordance with its terms and all applicable laws. [Attach any notices, correspondence and/or agreements which demonstrate that the previous lease was terminated].
6. The contents of this Affidavit, including any documentation attached hereto, are true and accurate. The undersigned acknowledges that the City of Pickering is relying upon this Affidavit for the purpose of processing the Owner's application for a Vacant Unit Rebate. The undersigned acknowledges that it is an offence to knowingly make a false or deceptive statement in this Affidavit or in any other document submitted to the City of Pickering in support of the Owner's application for a Vacant Unit Rebate.

And I Make This Affidavit in support of the Owner's application for a Vacant Unit Rebate pursuant to Section 364 and O. Reg 210/05 of the *Municipal Act* and for no other or improper purpose.

Sworn before me in the City of \_\_\_\_\_

in the Province of Ontario

\_\_\_\_\_  
Signature of Property Owner/Agent

this (insert day) \_\_\_\_\_ day of (insert month) \_\_\_\_\_ (insert year) 20 \_\_\_\_\_

\_\_\_\_\_  
A Commissioner for taking oaths

(Application must include a valid Commissioner's stamp)

Personal information contained on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*. This information is collected for an affidavit in support of a vacant unit rebate. 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.