

Appendix A



Property Tax Relief Request Form

Important Information:

The purpose of this form is for an assessed person, or their authorized agent, to request under section 347(1) of the Municipal Government Act (MGA), that Council consider property tax relief, in the form of a reduction, cancellation, refund, or deferral, in respect to municipal property tax levied on the property as listed in Section 2 below.

Section 1 Information about whom is making the tax relief request

1. Is the requestor the: ☒ Property Owner or, ☐ Agent

2. Requestor Name: FOIP s. 17

3. Requestor Phone: FOIP s. 17

4. Requestor Address: FOIP s. 17

5. Requestor E-mail: FOIP s. 17

Section 2 Property information (From your property tax notice)

6. Assessment Roll Number: 017602

7. Property Address: FOIP s. 17 Leduc, AB

Section 3 Type of property tax relief being requested (Please check ONE of the below boxes)

☐ Property Tax Cancellation

☒ Property Tax Refund *Credit toward arrears*

☐ Property Tax Reduction

☐ Tax Penalty Cancellation

☐ Property Tax Deferral

Section 4 \$ Amount of property tax relief being requested (Enter dollar amount)

\$ 11,100.

half the price of garage in 2014/2015

Section 5 Reason(s) for Property Tax Relief Request (Please articulate the reasons and/or circumstances for your request)

(Please attach additional information to this form if you require more space)

Pls see attached - 1 copy for each councillor.

Appendix A (Continued)

Section E	Acknowledgement & Certification
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By signing below, I acknowledge and certify that:

- i. I understand that for the purposes of MGA section 347(1), this request for property tax relief is valid only for the properties identified in Section B of this form, and that this request applies only to tax levies and/or tax penalties levied in respect of the *current* Taxation Year.
- ii. I understand that for the purposes of MGA section 347(1), that the decision of Council on the matter of property tax relief is final, and there is no further recourse available on this matter.

Signature of Property Owner(s) or Authorized Agent

FOIP s. 17

Date: March 12 / 24

Section F	Form Submission Information
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Please remit this completed form to:

TAXATION DEPARTMENT
 #1 Alexandra Park
 Leduc, AB T9E 4C4
 Phone: 780.980.7105
 Fax: 780.980-7127
 Email: propertytaxes@leduc.ca

You will be contacted at a later date with details of when Council will hear and decide upon your request.

FOR OFFICE USE ONLY

Date Received: 	Received By: 	Property Tax Verification: Current Year Tax Levy: \$ _____ Prior Year Tax Arrears: \$ _____ Prior Year Tax Delinquent: \$ _____ Tax Penalty Totals: \$ _____ Other: \$ _____ TOTAL Outstanding: \$ _____
Notification to Director: Y N Notification to Taxation: Y N Owner contacted: Y N	Comments: 	