

APPLICATION FOR PROPERTY TAX DEFERRAL

SENIORS, LOW-INCOME SENIORS OR LOW-INCOME DISABLED PERSONS

Taxation Year for which deferral is requested: _____

ASSESSMENT ROLL NO. 1948 _____ YEAR PURCHASED: _____

NAME OF PROPERTY OWNER: _____
(please print)

PROPERTY ADDRESS: _____

Seniors: 65 and older

I qualify as a "Low-Income Senior" and have attached the following documentation:

- Proof of age; and
- Proof of receipt of the Guaranteed Income Supplement (GIS) for the applicant or spouse, for the year you are applying for.

I qualify as a "Low-Income Disabled Person" and have attached the following documentation:

<input type="checkbox"/>	Ontario Disability Support Program (ODSP); or	Social Assistance Reform Act; or
<input type="checkbox"/>	Guaranteed Annual Income Supplement for the Disabled (GAIN); or	
<input type="checkbox"/>	most recent income tax assessment notice & documentation verifying one of the above	

- For a single person - income tax assessment notice showing income of \$23,000 or less; or
- For a family of two or more - income tax assessment notice showing income of \$40,000 or less

I certify that the above information is true, correct and complete.

SIGNATURE OF APPLICANT: _____

TELEPHONE #: _____ DATE: _____

FOR OFFICE USE:

Maximum cumulative Deferral:	2015 CVA	\$	x 75%	\$
Year _____ CVA Equivalent Property Taxes				\$
minus Year _____ Property Taxes				(\$)
Tax Increase				\$
minus \$100 threshold for Low-Income Seniors 55-64				(\$)
Current Year Deferral				\$
add Outstanding Taxes				\$
Cumulative Deferral				\$

Tax Deferral Program Pursuant to Regional Municipality of York by-Law No. A-0399-2004-026, as amended.

FAX COMPLETED FORM TO: 905-953-5150 OR E-MAIL TO: taxes@newmarket.ca