



COUNTY OF DUFFERIN

Treasury Department
55 Zina Street, 2nd Floor
Orangeville, ON
L9W 1E5
Telephone: (519) 941-2816
Fax No: (519) 941-4565

Tax Relief for Low-Income Seniors and Low-Income Persons with Disabilities.

APPLICATION

The Council of the Corporation of the County of Dufferin has passed a by-law providing for relief of a portion of property tax increases on property in the residential/farm property class for owners (or spouses or same-sex partners of owners) who are low-income seniors or low-income persons with disabilities.

The application shall be made annually prior to November 30
of the year in which the tax increase relates.

PLEASE NOTE: Applications cannot be processed before receipt of your final tax bill. Please include a copy of your final tax bill with this application.

A person is eligible for the purpose of this by-law if at the time of making the application they are:

- 65 years of age or older and eligible for or in receipt of the guaranteed income supplement as outlined in the Old Age Security Act.
- OR**
- Eligible for or in receipt of an allowance, benefits or income support as a disabled person or as a person with a disability as outlined in the Family Benefits Act or the Ontario Disability Support Program Act.
- AND**
- A person who has owned real property within the County of Dufferin for at least one year immediately preceding the date of the application.

If you feel you meet the above criteria and would benefit from this program, we encourage you to complete the attached application and forward it along with a copy of your final tax bill to the attention of **The Treasurer** at the following address:

**The County of Dufferin
55 Zina Street, 2nd Floor
Orangeville, ON, L9W 1E5**

Direct related inquiries to: The Treasury Department at 941-2816, ext. 2804.
All information will remain confidential.

APPLICATION: Section 1-Personal Data

I hereby apply for Property Tax Relief and in support of my application I am making the following statements:

Mr. Ms. Surname: _____ First Name: _____
Address: _____ Telephone Number: ____-____-_____
Town: _____ Date of Birth: _____
Postal Code: ____-____ Social Insurance Number: ____-____-_____

Section 2-Sources of Income *Please check all applicable*

____ Guaranteed Annual Income System (GAINS) ____ Guaranteed Income Supplement (GIS)
____ Old Age Security (OAS) ____ Ontario Disability Support (ODSP)
Other _____

Section 3-Property Information

Address of Property: _____

Legal Description of Property _____

Property Tax Roll Number: _____

Municipality or Township property is located in: _____

Section 4-Certification:

I hereby certify that the information provided is true and correct: _____

(Signature of Applicant)

<i>For Office Use Only</i>	
Tax Increase	\$
Less	\$50.00
Eligible Tax Rebate	\$
Date Received	
Date of Cheque	
Application Number	