



ANNUAL APPLICATION FOR RELIEF FROM TAXATION CHARITIES

Name of organization _____
Location of operation _____
Mailing Address _____
City _____ Postal Code _____

Charitable registration number _____

If not a registered charity, attach a copy of your charter (first year of application only)

Amount of current year's taxes billed (provide copy of bills(s)) \$ _____

Contact person _____
Telephone number _____

Signature of authorized person(s)

This form must be received by the Treasurer, Town of Goderich, 57 West Street, Goderich, Ontario, N7A 2K5.

FOR OFFICE USE ONLY

Roll number _____

Interim Rebate

_____ ÷ 2 x 40% = \$ _____

Previous Year's taxes

Final Current Year's Rebate

_____ x 40% = \$ _____

Current Year's taxes

Less Interim Rebate = \$ _____

Total Rebate Due = \$ _____