



ANNUAL APPLICATION FOR RELIEF FROM TAXATION  
CHARITIES

Name of Organization: \_\_\_\_\_

Location of Operation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

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 bill(s): \$ \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of authorized person(s)

This form must be received by the Treasurer, Town of Goderich, 57 West St., Goderich, ON N7A 2K5 no later than February 28<sup>th</sup> of the year following the taxation year to which the application relates.

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FOR OFFICE USE ONLY

Roll Number: \_\_\_\_\_

**Final Current Year's Rebate**

\_\_\_\_\_ x 40% = \$ \_\_\_\_\_  
Current Year's taxes