



# TOWN OF CLAREVILLE

## Application for Reduction of Property Tax

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Present Employer: \_\_\_\_\_

Date Last Employed: \_\_\_\_\_

Roll #: \_\_\_\_\_

OFFICE USE ONLY	
Previous Year's Reduction Approved	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
20__ Property Tax	_____
Discount _____%	_____
Net Taxes Payable	_____
Date Approved	_____
Approved By:	_____

Occupants 18 years of age & older residing at the address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total estimated income for all sources:

I. Basement Apartment Income	\$ _____
II. Income from Boarder	\$ _____
III. Spousal Income	\$ _____
IV. Interest Income	\$ _____
V. Pension Income	\$ _____
VI. Employment/Self-Employed Income	\$ _____
VII. Severance Pay	\$ _____
VIII. R.R.S.P. Income	\$ _____
IX. Income of other occupants of the household listed above	\$ _____
X. Other Income	\$ _____
Total 20__ Income (Actual)	\$ _____

### PLEASE NOTE:

- Reduction will be based on prior year's income.
- Application to be verified with copy of prior year's Income Tax with copies of all information slips attached and a copy of Assessment Notice received from Revenue Canada.
- Affidavit below must be completed, signed and sworn to.



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## AFFIDAVIT

I, \_\_\_\_\_, of the Town of Clareville, in the Province of Newfoundland & Labrador, **MAKE OATH AND SAY** that the information given in this application is true, correct and complete to the best of my knowledge and belief, and I hereby authorize any or all of the sources of income mentioned in this application to give to the Town of Clareville any information required in connection with this application. A photocopy of this authorization shall be as valid as the original.

I further undertake to advise the Town of Clareville, in writing, of any changes in my circumstances as stated herein.

**SWORN TO** before me at Clareville, in the Province of Newfoundland & Labrador, this

\_\_\_\_ day of \_\_\_\_\_, A.D. 20 \_\_\_\_.

\_\_\_\_\_  
Signature – Applicant

\_\_\_\_\_  
Justice of the Peace or  
Commissioner for Oaths