

THE CORPORATION OF THE TOWN OF WHITBY
In the Regional Municipality of Durham

Telephone:
905-668-5803
Fax: 905-686-7005
575 Rossland Road E.
Whitby, ON L1N 2M8



Personal information on this form is provided under the authority of the Municipal Act 2001, S.O. c. 25, as amended, and will be used to determine eligibility for tax reduction or tax deferral on property taxes paid to the Municipality. Questions about this provision should be directed to the Tax Department, 575 Rossland Road East, Whitby, L1N 2M8, (905) 668-5803.

**APPLICATION FOR ELDERLY PENSIONERS HOMEOWNERS
TAX DEFERRAL PROGRAM**

PART A - PROPERTY

MUNICIPAL ADDRESS: _____

ASSESSMENT ROLL: _____

PART B - OWNER INFORMATION

NAME OF REGISTERED OWNER _____

RESIDENCE OF OWNER _____

TELEPHONE NUMBER _____

DATE OF BIRTH _____

Year/Month/Day

NAME OF SPOUSE _____

Surname/Given Names

DATE OF BIRTH _____

Year/Month/Day

SOCIAL INSURANCE NO: _____

PART C - DECLARATION

I declare the following to be true, to the best of my knowledge:

- (a) I, and/or my spouse, own and occupy the property referred to in Part "A" above for the purposes of principal residence..
- (b) I qualify for the GIS.

I authorize the Income Security Programs Section of HRDC to release to the Town of Whitby such information as will verify my eligibility for the GIS.

DATE OF APPLICATION (VAILD FOR CURRENT YEAR ONLY)

Year/Month/Day Signature of Applicant

PART D - AGREEMENT

In addition to the above, I agree to the following Terms and Conditions:

- (c) That all deferred taxes become due and payable on the date of disposition of the property or transfer of title.

Amount of 2011 Assessment Related Tax increase deferrable \$ _____

FOR OFFICE USE ONLY

Owner in Receipt of GIS Yes No

Date _____