

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

Telephone:  
905-668-5803  
Fax 905-686-7005  
575 Rossland Rd 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 LOW INCOME DISABLED HOMEOWNERS  
TAX DEFERRAL PROGRAM**

**PART A - PROPERTY**

(Property for which the application for homeowners tax deferral is being made)

MUNICIPAL ADDRESS: \_\_\_\_\_

ASSESSMENT ROLL: \_\_\_\_\_

**PART B - OWNER INFORMATION**

NAME OF REGISTERED OWNER \_\_\_\_\_

RESIDENCE OF OWNER: \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
Year/Month/Day

SOCIAL INSURANCE NO: \_\_\_\_\_

NAME OF SPOUSE : \_\_\_\_\_  
Surname/Given Names

RESIDENCE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
Year/Month/Day

**PART C - DECLARATION**

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

- (a) I, or my spouse, own and occupy the property referred to in Part "A" for the purposes of personal residence.
- (b) I, or my spouse, qualify for the Ontario Disability Support Program.

I authorize the Ministry of Community and Social Services to release to the Town of Whitby such information as will verify my receipt of the Ontario Disability Support Program.

**DATE OF APPLICATION (VALID 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:

- (a) 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  
Spouse in Receipt of GIS Yes No

Date \_\_\_\_\_