



Introduction

The information provided in this application will be used in conjunction with documentation submitted and with reference to the Permissive Tax Exemption Guidelines to determine exemptions.

Please note:

- Council may request a presentation from applying organizations
- Exemptions are granted for one year only; organizations are required to submit an application annually
- City of Delta may request additional information

Registered Owner Name (if different than above)

- City of Delta reserves the right to review records to verify information provided in support of an application
- Council may, at its discretion, reject any or all applicants in any given year
- Recipients of exemptions may be asked to publicly acknowledge the exemption

Section 1: General Information

Name of Organization

,		
Property Address		
Folio Number		
Mailing Address (if different from Property Address)		
Contact person who can provide additional information about this application		
Name		
Position Title		
Telephone		
Mailing Address		
Email Address		

Organization Executives	
President/Chairperson	
Vice President/Vice Chairperson	
Treasurer	
Purpose of organization (provide a brief description of the majand the main user groups)	or programs/services/benefits delivered by your organization
Date of Incorporation	
Society Registration Number	
Charitable Organization Number (if applicable)	
Number of Years in Operation	
List all licences held by the organization (e.g., licences under the	ne Community Care Facility Act, Hospital Act)
Section 2: Organization Information How is your organization consistent with municipal policies, pl	ans, bylaws, and regulations?
Thow is your organization consistent with mannerpar poncies, pr	
How is your organization non-profit?	

How is your organization a complementary extension to Delta services and programs?		
What is the principal use of the property?		
Is any part of the buildings on the property used or rented by or private operators or by any group other than your organizat		
Does anyone live in the buildings? If yes:		
How many people?		
What is the square footage of the living area?		
How is your organization accessible to the public?		
How is your organization used primarily by Delta residents?		
The number of users of your service during the most recer	nt fiscal year	
Of these users, specify the number who are residents of D	elta	
Is the organization run by volunteers, paid staff, or a combinati	ion?	

I			I	
Year	Funding Agency	Type of Gra	int	Amount
If your organization has received grants or tax exemptions in previous years from the City of Delta, another municipality, other government or non-government organizations (e.g., the Provincial Government, BC Housing, BC Rental Housing), please provide the following information:				
Please indicate all funding source	ces for your organization			
Note: Consideration will only be	e given to applicants providing a	adequate financial in	formation	
_	ity information return (T3010) ts for the most recent fiscal yea		returns (T2	and 1044)
Section 3: Financial Information	n			
Other activities which may be p	ertinent to your application			
The number of paid stuff				
The number of volunteer ho	ours worked per year			

	e a grant after March 31, 1974, un e amount and date received	der the Housing Construction (E	Elderly Citizens) Act befor
le information on pend izations	ling applications for grants with m	unicipalities, other government	and non-government
Funding Agency	Type of Grant Requested	Amount	Status
le information on incor meeting rooms or park	me from rental or use of the building lots)	ing on the exemption property,	or other portions of the
Source of Income	Organization Using Facility	Income Received Per Use	Annual Income

Does any of this funding include provision for property taxes?

Property	Annual Income

I certify that the information provided in this application and the supporting documentation are true and accurate.

Provide information on any other properties the organization owns and which provide revenue

Name (please print)	
Signature	
Position	
Date	

Website: www.delta.ca

Phone: (604) 946-3235

Email: taxation@delta.ca

To be considered for a Permissive Tax Exemption for the following year, please submit completed applications and associated documentation by May 31 to:

Taxation Office City of Delta 4500 Clarence Taylor Crescent Delta, BC V4K 3E2

For additional information, please contact the Taxation Office:

Telephone: 604-946-3235 Email: taxation@delta.ca