

**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
- 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	
Registered Owner Name (if different than above)	
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 major programs/services/benefits delivered by your organization and the main user groups)

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 Community Care Facility Act, Hospital Act)

## Section 2: Organization Information

How is your organization consistent with municipal policies, plans, bylaws, and regulations?

How is your organization non-profit?

How is your organization a complementary extension to Delta services and programs?

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What is the principal use of the property?

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Is any part of the buildings on the property used or rented by commercial or private operators or by any group other than your organization?

Yes

No

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?

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How is your organization used primarily by Delta residents?

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The number of users of your service during the most recent fiscal year	
Of these users, specify the number who are residents of Delta	

Is the organization run by volunteers, paid staff, or a combination?

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The number of volunteers	
The number of volunteer hours worked per year	
The number of paid staff	

Other activities which may be pertinent to your application

**Section 3: Financial Information**

Please provide the following documentation:

- Most recent registered charity information return (T3010) or non-profit society returns (T2 and 1044)
- Audited Financial Statements for the most recent fiscal year
- Budget for current taxation year

Note: Consideration will only be given to applicants providing adequate financial information

Please indicate all funding sources for your organization

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:

Year	Funding Agency	Type of Grant	Amount

Does any of this funding include provision for property taxes?

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Did your organization receive a grant after March 31, 1974, under the Housing Construction (Elderly Citizens) Act before its repeal? If so, please state the amount and date received

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Provide information on pending applications for grants with municipalities, other government and non-government organizations

<b>Funding Agency</b>	<b>Type of Grant Requested</b>	<b>Amount</b>	<b>Status</b>

Provide information on income from rental or use of the building on the exemption property, or other portions of the land (e.g., meeting rooms or parking lots)

<b>Source of Income</b>	<b>Organization Using Facility</b>	<b>Income Received Per Use</b>	<b>Annual Income</b>

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

Property	Annual Income

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

Name (please print)	
Signature	
Position	
Date	

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](mailto:taxation@delta.ca)

Personal information is collected by the City of Delta under the authority of Section 26(c) of the **Freedom of Information and Protection of Privacy Act (FIPPA)** and will be used to administer the Permissive Tax Exemption Application with the City of Delta, Taxation Office. Should you have any questions about the collection of this personal information, please contact the Taxation Office at (604) 946-3235 and [taxation@delta.ca](mailto:taxation@delta.ca) or the City Clerk at (604) 946-3220 and [cityclerk@delta.ca](mailto:cityclerk@delta.ca).