

This program provides a 50% rebate of Residential Municipal property taxes paid for 2018, up to \$800.

To be eligible, you must have received, or be eligible to receive, the Guaranteed Income Supplement (GIS) or the Allowance in 2019. Your 2018 Municipal Residential Property Taxes must be paid in full. The taxes must be in your name or include your name.

- TO APPLY:**
- Please complete the application in full. An incomplete application may delay your rebate.
 - Include proof you received or are receiving the Guaranteed Income Supplement (GIS) or the Allowance in 2019. If you do not have proof, you may request a letter from Service Canada at **1-800-277-9914**.
 - Include a 2018 Municipal Property Tax bill and receipt which shows taxes paid in full.

If you don't have a bill, you can request a Municipal Property Tax Sheet from your municipal government office. Due to a high volume of requests, it may take 4-6 weeks for your municipal office to prepare your tax sheet. Once you receive it, be sure to include it with your application.

All applications must be postmarked no later than December 31, 2019.

✉ **Mail to:** Property Tax Rebate for Seniors, Box 283, CRO, Halifax, NS, B3J 2N7

☎ **Fax to:** 902-428-2164 *(Please make sure to send both sides of the application.)*

Section 1 Applicant Identification (Please print all information in block letters)

A. Applicant Name (first, middle, last): _____

Applicant SIN: ____ ____ ____ **Date of Birth:** DD / MM / YYYY

Spouse/Partner Name (first, middle, last): _____

Spouse/Partner SIN: ____ ____ ____ **Date of Birth:** DD / MM / YYYY

<p>B. Contact Information</p> <p>Phone: _____ <input type="checkbox"/> cell <input type="checkbox"/> landline</p> <p>Alternate: _____ <input type="checkbox"/> cell <input type="checkbox"/> landline</p>	<p>Email Address: _____</p> <p>Assessment Account # (AAN): _____</p>
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C. Address Information

Civic Address _____

Street # & Name Unit Town Prov. Postal Code

Mailing Address *(if different than civic address)*

Street # & Name PO Box or RR# Town Prov. Postal Code

SIGNATURE(S) REQUIRED ON BACK OF FORM →

