

City of Iqaluit

Application for Property Tax Exemption

Applications can be submitted at any time

Non-Profit Organization

Additional information can be uploaded on additional pages

FOR OFFICE USE ONLY								
Property Roll Identifier						Taxation Year	Date	
Legal Description	Lot	Block	Plan	Part	Sec.	Township	Range	Mer.
Municipal Property Address								
Total Assessment			Land Assessment			Building Assessment		

PART 1- PROPERTY INFORMATION		
Name of property owner	Telephone Number (Bus)	Telephone Number (Res)
Address of property owner	Postal Code	Fax Number or email address
Address of property for which exemption is requested		
Portion/Area of the property held by the organization <input type="checkbox"/> All <input type="checkbox"/> Part Area Occupied is:		
Is there an agreement in place that confirms the portion of the property held by the organization? <input type="checkbox"/> No		Date organization took occupancy (mm / dd / yyyy)
Yes <u>if yes, provide expiry date</u> (mm / dd / yyyy)		

PART 2-ORGANIZATION INFORMATION		
Name of organization operating the facility	Telephone Number (Bus)	Fax Number or email address
Act under which organization is registered as a non-profit organization	Registration Number	
Organization's objectives/purposes 1. 2. 3. 4. 5.		
a) Are the resources of this organization devoted to stated objectives / purposes <input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No b) Are there any monetary gains or benefits received by the organization as a result of its provision of services <input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No c) Does your organization expect to move from this property during the next 4 years <input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No d) Is any income or profits from the organization paid to anyone other than wages <input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No e) Are the organization's services similar to any other organization & or business in Iqaluit <input type="checkbox"/> Yes attach a sheet with organization/business name(s) <input type="checkbox"/> NO		

PART 3- RETAIL COMMERCIAL OR LICENSED AREA

Does the organization have a retail commercial area at this location? ☐ Yes ☐ No
 If yes, do you operate this area? ☐ Yes ☐ No

What goods or services are sold at the retail commercial area?

For what purpose is the net income from the retail commercial area used?

PART 4 - PROPERTY USE INFORMATION specific to a non-profit organization

What facilities are on the property?

- 1.
- 2.
- 3.
- 4.

What times are they accessible to the public?

Are there membership requirements including fees?

Describe the purpose for which the facility is used.

Describe the typical beneficiary and where they reside.

Are there any restrictions in place preventing anyone from using the facility? ☐ Yes ☐ No
 If there are restrictions, explain

Are the services provided by the organization advertised and promoted to the public, or primarily to members? ☐ General Public ☐ Members

PART 5 - CONTACT INFORMATION

Primary contact name	Position within organization	Telephone number	Email address
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Mailing Address for organization	Postal Code	Email address
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President of Organization	Cell Phone	Phone	Email address
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Treasurer of Organization	Cell Phone	Phone	Email address
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PART 6 - REQUIRED INFORMATION - *please ensure the following are submitted as attachments*

- t) Certificate of Incorporation, current confirmation that the organization is registered, in good standing and the Memorandum of Association and the Articles of Association, if any.
- 2) Copies of:
 - The organizations most current financial statements,
 - Certificate of Title (if applicable),
 - The current lease agreement with the property owner (if applicable),
 - A plan showing the area leased.
- 3) If applicable, a letter from the property owner confirming that he/she is aware of this exemption application and understands that the municipality will estimate taxes on the area occupied by the organization based on methodology that may be different from that used by the property owner.
- 4) Any available brochures, newsletters or other pertinent information relative to the organization.
- 5) Other information pertinent to the application

I certify that I am authorized to submit this application on behalf of the organization, and that the information provided on this application form, and as attachments to this form, is true and accurate in every respect, and that all information required under Part 6 of this application is included.

 Name (Please Print)

 Date

 Position

 Signature