

## Municipal District of Opportunity No. 17 F.6 Grants Policy Schedule C: Application for a Senior Citizen Tax/Utility/Heating Grant

Name of Applicant:		Date of Application:			
Mailing Address: Legal Land Descrip		an:		Lot:	
Tax Roll Number:		<del>.</del>	Phone Number:		
Application for:	Utilities Exemption:	Tax Exemption:			
ELIGIBILITY: a) Proof of Age Attac	hed (copy of current picture ic	dentification with DOB)	Yes	. No	
	lessee or life estate hole Lessee	der of this property? (check o			
c) Do you occupy this	s property as your prima	ry residence?	Yes	No	
If yes, for	how long?	Less than 6 mos.	Over 6 mos.		
d) Proof of Income eligibility attached			Yes	No	
e) Do you have an ex		Schedule 90 - T1 General Tax Fax under the Indian Act ur name?	Yes	No	
f) Do you have any c	urrent debts on your Mui	nicipal Service Accounts?	Yes	No	
Heat Grant Specicion	::				
G) I am applying for	a grant for (circle one): I	Propane / Firewood / Gas			
Opportunity No. 17 if I cease to reside at the I understand that this	I cease to be eligible for ne property, or I no longer grant approval may be	nd accurate. I declare that I wing the Senior Citizen Grant Proper have a utility or tax account revoked if my service account nent can become void for any	grams for any reason such with the MD 17.	n as that ne ownership	
Signature of Applicar	nt(s)		Date		
Signature of MD Des	ignate		Date		
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"The personal information collected with this application will be utilized for the declared purpose only and is subject to compliance with the Freedom of Information and Protection of Privacy Act."

Updated: 2023