



Permissive Tax Exemption Application Form – 2025 Taxation Year Only

SECTION 1 - APPLICATION DEADLINE

Forward your application on or before **Monday July 15, 2024 by 4:30 pm** to:

- Mail or in person: PO Box 20, 8645 Stave Lake Street, Mission BC V2V 4L9
- Email: tax@mission.ca
- Complete one application per property using this form. Late applications will **NOT** be accepted.

SECTION 2 - ORGANIZATION INFORMATION:

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|---------------------|-------------------------|--------|
| Organization Name: | CRA/Society Act Number: | |
| Contact Person (1): | Phone: | Email: |
| Contact Person (2): | Phone: | Email: |

Full Mailing Address:

What is the purpose of your organization? (include a brief description of the programs and/or activities)

Are your programs/activities available to all residents of Mission? Yes No If not, please explain:

If your organization operates on behalf of members, what are the requirements for membership?

SECTION 3 - SELECT PROPERTY TYPE FOR EXEMPTION:

- Owned or held by charitable, philanthropic or other not-for-profit corporations
- Owned or held by municipalities, regional cities or other local authorities
- Owned or held by athletic or service clubs/ associations and used as public parks/ recreation grounds/ for public athletic or recreational purposes
- Operated as a licensed community care facility/ registered assisted living residence
- Provides municipal services under partnering agreements
- Lands held for Cemetery purposes
- Specified properties which are part of a revitalization area

SECTION 4 - DETAILS OF EXEMPTION PROPERTY:

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| 1. Property Address: | Property Roll #: |
| Legal Plan Description: | Legal Lot Description |
| 2. Briefly describe the principal use of the property: | |
| 3. The exemption is being claimed for: <input type="checkbox"/> Whole Property <input type="checkbox"/> Portion of Property If the exemption is being claimed for a portion of the property: Gross floor area of the building:sq ft Floor area being claimed for use:sq ft | |
| 4. Property Ownership: <input type="checkbox"/> Own <input type="checkbox"/> Lease/Rent Entire Property <input type="checkbox"/> Lease/Rent a Portion of the Property.....% a) If the property is leased/rented, who owns the property? b) Term of lease/rental agreement: | |
| 5. Leased Space: Does your organization lease/rent any portion of the property to another agency/individual? <input type="checkbox"/> Yes <input type="checkbox"/> No Portion of Property.....% Floor Area.....sq ft If yes, name of the agency/individual leasing/renting the property Is this agency for profit or non-profit?Term of lease/rental: For what purpose is this leased/rented space being used? | |
| 6. Commercial Activity (i.e. daycare center, catering and hall, thrift shop, etc.): a) Does <u>your organization</u> conduct any commercial activity on this property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide a brief description of the commercial activity, (include hours of operation and fees/charges): b) Does <u>another organization</u> conduct any commercial activity on this property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide a brief description including activity, hours of operation and fees/charges): | |
| 7. Does anyone live in the building: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: a) How many people? b) Living space square footage: | |



SECTION 5 - REQUIRED SUPPORTING DOCUMENTATION CHECK LIST

- Current year’s budget
- Previous year’s annual financial statement
- Current site plan for property
- Lease/rental agreement *(if applicable – see Section 4, question 4)*
- If organization is leasing/renting a portion of a property, provide a site drawing for that section of property *(if applicable – see Section 4, question 3)*
- Lease/rental agreements to other agencies *(if applicable – see Section 4, question 5)*
- Confirmation of charity status per CRA website www.cra-arc.gc.ca or Certificate of Good Standing as registered society per BC Registry Services

Only completed applications, with all supporting documentation, will be processed. Additional information may be requested, as deemed necessary.

SECTION 6 - DECLARATION BY AUTHORIZED SIGNATORY

I understand that any permissive tax exemption given for the current tax year are not indicative of permissive tax exemptions to be awarded in future years. I understand that it is our organization’s responsibility to contact the City of Mission if any changes occur with respect to ownership of principal use of property.

The above information is certified to be true and correct. The City of Mission will rely on the accuracy of all information contained herein and may reject applications later found to be inaccurate.

| | |
|----------------------|-----------|
| Name (please print): | Position: |
| Signature | Date: |

All completed applications with supporting documentation are due **Monday July 15, 2024 by 4:30 pm** and can be submitted to Finance Department at tax@mission.ca.

The personal information on this form is collected for the purpose of an operating program of the City of Mission as noted in Section 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and use of the information, please contact the Freedom of Information Coordinator (604-820-3724).