THE CORPORATION OF THE TOWN OF COLLINGWOOD

CHARITABLE ORGANIZATIONS

APPLICATION

REBATE OF PROPERTY TAXES

Name of Charitable Organization		Revenue Canada Charitable Reg. Number	
Mailing Addre	ss	Postal Code	
Length of time at this location		Organizations Phone Number	
Applicant/authorized signing officer/Contact person		Position Held	
Mailing Address if different from above		Phone number if different from above	
Eligible Proper	rty address/Location		
	Rebate Calculation	for Tax Year 2022	
1.	Apportioned 2022 Taxes		
2.	2022 Tax Rebate (40% of # 1)		
3.	TOTAL REBATE		
form for any C		rect. This application will also act as a consent of Collingwood may require to validate the program.	
Signature of authorized signing officer		Date	
	FOR OFFICE	USE ONLY	
Roll Number		Municipal Portion	
		County Portion	
Date		Education Portion	
Approved By		TOTAL REBATE	