



**Application for \$200.00 Tax Exemption
Fiscal Year 2023/2024**

Return to: PO Box 79, Guysborough, NS B0H 1N0

1. _____ of _____
Name Address
2. Property/Municipal Account # _____
3. Is property occupied by applicant as principal place of residence? (Y/N) _____

****This exemption shall apply only to the property of a ratepayer occupied by him or her, as his or her home****

I certify that the total income for the previous year (2022) is as follows:

****Note - Income of all members of the same family residing in the same household must be in this Section. Maximum allowable income will be \$35,000.00 for this exemption****

CANADA REVENUE AGENCY NOTICE OF ASSESSMENT INFORMATION- 2022

- | | |
|---|-----------------|
| a) Line 150- Applicant Total Income | \$ _____ |
| b) Line 150- Spouse/Common Law Partner Total Income | \$ _____ |
| c) Line 150- Other Individuals Living in Same Household | \$ _____ |
| d) Line 150- Other Individuals Living in Same Household | \$ _____ |
| Total of All Income (a+b+c+d) | \$ _____ |

Please attach copies of Notice of Assessments

Tax exemptions apply to property taxes **only**. They do not apply to area rate(s) such as fire levies, street light levies, sewer levies etc.

IN WITNESS WHEREOF THE PARTIES HERETO HAVE AFFIXED THEIR SIGNATURES

Sworn to at _____ in the Municipality of the District of Guysborough,
this _____ day of _____, 2023.

Councillor, Justice of the Peace,
Commissioner of Oaths in and for
the Municipality of Guysborough

I, _____
hereby swear the above information
to be true and accurate
(Applicant Signature)

Office Use Only

District No.	_____
Assessment Value	\$ _____
Total Income	\$ _____
Tax Exemption	\$ _____
Approved	() Yes () No