Annual Reporting: Non-Profit Tax Relief Renewal Form. (Confirmation of Ownership, Occupancy and Good Standing) Please complete all required information as listed in this form.

Instructions

NOTE: This form must be filled out to ensure automatic re-enrollment in the program. **Only one form** needs to be completed. For multiple properties please attach a separate list of the Assessment Account Numbers. Do not include any other documents. The form must include the names of two members of the Board of Directors and mailed to: Grants & Contributions, HRM Finance and Asset Management, PO Box 1749, Halifax, NS B3J 3A5. Or e-mailed to nonprofittax@halifax.ca

Important Notice: The Notification Form must be submitted annually on or before June 30th. Late renewals will be pro-rated, starting July 1st, to deduct one day's tax relief for each day late. If June 30th or September 28th falls on a Saturday or Sunday, the deadline is the next business day. Maximum Penalty: July 1st to September 28th = a penalty of up to $2,000 per property; after September 28th = a penalty of up to $5,000 per property.
A fillable copy of this form is available on the Program's web site:
www.halifax.ca/business/doing-business-halifax/tax-relief-non-profit-organizations

1. Name of Non-Profit/Charity:

2. Assessment Account Number (AAN) for properties: (Add a separate list of AAN's for multiple properties)

3. The registration of the organization as a charitable and/or non-profit organization is in good standing: **YES** ☐ **NO** ☐

4. The organization remains owner of the property/properties for the year that tax relief is requested (April 1 to Mach 31) **YES** ☐ **NO** ☐

5. If a tenant, the organization has a signed lease agreement for the year that tax relief is requested (April 1 to March 31). **YES** ☐ **NO** ☐

6. There **has been a change** in the use of the property/properties for which the organization originally applied for tax relief: **YES** ☐ (describe change) **NO** ☐

7. The organization has declared any occupancy of the property by someone other than the applicant to HRM (Example; lease a portion of your property to private entity).
YES ☐ (Contact staff for further direction) **NOT APPLICABLE** ☐

8. Required Names

Board of Director Date:

Date:

Board of Director
or Signing Authority

IMPORTANT - Requests for address changes must be made by e-mailing contactus@311.halifax.ca or Call 311.