



**Finance Department**  
 3330 Wishart Road  
 Victoria, BC V9C 1R2  
 (250) 478-5999  
 finance@colwood.ca

# APPLICATION FOR PERMISSIVE TAX EXEMPTION

Application Deadline: 4:30 PM AUGUST 31, 2017

<b>NAME OF ORGANIZATION:</b>		<b>FOLIO NUMBER:</b>
<b>ORGANIZATION ADDRESS:</b>		
<b>MAILING ADDRESS:</b>		
<b>CONTACT PERSON NAME:</b>		<b>EMAIL ADDRESS:</b>
<b>CONTACT PERSON TITLE:</b>		
<b>WEBSITE:</b>		<b>TELEPHONE:</b>

<b>Please review the permissive tax exemption criteria on page 6 of this form. Is the applicant organization eligible to apply?</b>	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>
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If "YES" was answered above proceed to answer the following questions.

Is the organization a registered non-profit society in British Columbia?	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>
Society or charity registration number:	#:	
Is the organization a registered business in British Columbia?	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>
Would the organization wish to present the Application to Council?	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>

**REQUIRED INFORMATION:**

**Organizational Goals or Purpose:**

**Programs and Services Provided:**



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**Differentiation - *How are the services provided distinct from similar municipal and public services made available to Colwood residents?***

**Benefit to Colwood - *How do services provided by the organization enhance the quality of life for Colwood residents?***

*Examples include:*

- Economic – *benefits that promote community economic health, development, or tourism;*
- Social – *social benefits to youth, seniors, or other community groups;*
- Cultural – *heritage, educational, or other benefits which promote community cohesiveness;*
- Environmental – *benefits to the ecological wellness of the municipality.*

**Additional Information – *Use this area to include other information that may be pertinent to the application.***

**Accessibility - *Are your organizations' services accessible to all Colwood residents?***

YES:  NO:  If no, please explain:



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**Compliance - Is the organization in full compliance with local municipal bylaws, policies, plans, codes and regulations?**

YES:  NO:  If no, please explain:

**Funding Received - Include grants or other amounts received from any government or other organizations.**

Source of Funding	Funding Description	Amount of Grant	Years Received
		\$	

**Impact to the Organization – How would receiving a permissive tax exemption help the organization?**

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**DOCUMENTATION CHECKLIST:**

**Attach the following required documentation.**

- Organization’s current year operating budget;
  - Organization’s most recent audited annual financial statements;
  - Organization’s most recent annual report;
  - Recent copy of title certificate or lease agreement;
  - Names of the organizations Board of Directors or similar if applicable.
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**PROPERTY INFORMATION:**

*Submit separate applications for each property.*

<b>Registered Owner:</b>	<b>Folio Number:</b>
<b>Property Address:</b>	

**Principal Use of Property** – *What is the area occupied by the organization typically used for?*

**Commercial Use of Property** – *Do any profit generating activities occur on premises at any point during the year?*

**Third Party Use of Property, if any** – *Provide information regarding leased areas on the property.*

<b>Business Name:</b>	<b>Business Type:</b>	<b>Square footage of leased area:</b>	<b>Lease monthly rate:</b>
			\$

**Other Services Provided from this Property:** \_\_\_\_\_



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**STAFFING AND FEE INFORMATION:**

Staffing	Number of Staff	Estimated Annual Hours
Full-time employees...		
Part-time employees...		
Volunteers...		
Approximate number of residents served annually...		

**Residence - Does anyone reside at the property?**

YES:  NO:  If yes, please explain:

**Revenue or Fees Charged**

*Examples:*

- Membership fees
- Admission fees
- Rental fees
- Other fees

Revenue or Fee Description	Amount
	\$

**Please attach documentation of sufficient detail that indicates through scale diagram or written description:**

- Applicant property overall boundaries and dimensions, including square footage;
- Location and size of improvements including buildings, parking lots, and other public use areas;
- Proportion of areas within the property used by the organization to deliver services; include square footage.



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Criteria information below is provided for guidance and convenience only; refer to Section 224 of the Community Charter for legally binding terms.

**CRITERIA**

**Tax exemptions may be provided for land or improvements owned or held by the following:**

- Charitable, philanthropic, or not for profit organizations;
- Religious organizations;
- Athletic or service club association;
- Seniors homes, private schools or private hospitals;
- Arts, cultural or educational programs or facilities available to the public.

**COUNCIL POLICY EXCERPT**

*“The purpose of this policy is to allocate limited financial resources and give support to local organizations, within defined parameters; and to guide identification of properties meeting Council’s objectives for property assessment exemption.*

*Council believes it does not have a mandate to spend Taxpayers dollars on charitable organizations or objectives. Council believes that if taxpayers wish to spend their money for this purpose then each individual taxpayer has the opportunity to do so without being compelled to support an organization through their tax dollars. Where Council does give financial support it is to further Council’s objective of enhancing the quality of life (economic, social or cultural) in the City by assisting organizations that serve these objectives.*

*In that context Council may give limited financial support, with the overall amount determined annually during the development of the annual financial plan.”*

**POLICY: TAX001 (Adopted by Council: 2009-11-23)**

**Applications received that are incomplete, do not meet the criteria, or submitted after the deadline will not be considered. Please ensure all requested information is provided with the application prior to submission.**

<i>I hereby declare that the statements and information contained in the material submitted in within and in support of this application are to the best of my belief true and correct in all respects.</i>	
<b>SIGNATURE:</b>	<b>DATE:</b>
<small><i>Personal information you provide on this form is collected to assist in a program related to personnel administration pursuant to Section 26 (c) of the Freedom of Information and Protection of Privacy Act (FOIPPA) and will only be used for related purposes. Your name will be treated as public information; however your personal information will not be released except in accordance with the FOIPPA. Questions about the collection of your personal information may be referred to the Information &amp; Privacy Coordinator at Colwood Municipal Hall, 3300 Wishart Road, Colwood. BC V9C 1R1, or by calling (250) 478-5999.</i></small>	

**Please submit your organization’s completed application to:**

Director of Finance  
 City of Colwood  
 3300 Wishart Road, Victoria, BC V9C 1R1  
 Telephone: 250-478-5999  
 Fax: 250-478-7516  
 Email: [finance@colwood.ca](mailto:finance@colwood.ca)