



2024 OLDER ADULTS PROPERTY TAX DEFERRAL PROGRAM APPLICATION

Tax Deferral Year

Property Roll Number

Please complete the form below and return to your Local Municipality's tax office.

Note: Proof of age and **Notice of Assessment prepared by Canada Revenue Agency** MUST accompany this application.

Please include the non-refundable application fee of \$50 (payable to your Local Municipality) with the initial application. There is no fee for the annual renewal.

An approved application is the agreement between the applicant(s) and the Local Municipality.

For additional information, visit halton.ca

Program participants will not be eligible to claim the Ontario Property Tax Credit or the Senior Homeowner's Property Tax Grant on income taxes while in the program. Please consult your financial advisor about the program before you apply. Costs for any financial and/or legal advice related to this program will be the responsibility of the applicant(s).

Check here to indicate that you have read and understand the above information.

Part A—Halton Property Ownership

Principal Residence for the Last Four Years

Address (Number, Street, Unit):			
City / Town:	Province:	Postal Code:	Years at Residence:



Additional Property Ownership (if applicable)

Address (Number, Street, Unit):			
City / Town:	Province:	Postal Code:	
Address (Number, Street, Unit):			
City / Town:	Province:	Postal Code:	

Part B—Applicant (s) (All registered owners must apply)

Applicant Name:	Date of Birth (YYYY/MM/DD):	Phone:	Email:
Applicant Name:	Date of Birth (YYYY/MM/DD):	Phone:	Email:
Applicant Name:	Date of Birth (YYYY/MM/DD):	Phone:	Email:
Applicant Name:	Date of Birth (YYYY/MM/DD):	Phone:	Email:

Part C—Alternate Contact

Alternate Contact Name:		Phone Number:	
Address (Number, Street, Unit):		Email:	
City / Town:	Province:	Postal Code:	
Relationship to Applicant(s):			



Part D—Eligibility Criteria

	Yes	No
Are all the registered owners of this property age 65 or older by the end of the current year?		
Are you the registered owner(s) of the property and is it your Principal Residence?		
Has this property been the Principal Residence of at least one of the registered owners for the previous four or more years?		
Is the combined annual gross income of all registered owners \$66,100 or less?		
Are any of the registered owners currently participating in any other property tax relief program (rebate, deferral, grant, etc.) through Halton Region or a Local Municipality? (if applicable)		
Do any of the registered owners currently have any property taxes, penalties or interest in arrears from previous years?		

Please provide Proof of Age (indicate type of document such as passport, driver’s license).

Please provide your most recent Notice of Assessment by Canada Revenue Agency (no older than 2 years from the current year).

Applications must be received on or before September 30 in the year for which the property tax deferral is sought.

Every registered owner must complete this agreement to permit the deferral of property taxes on the above-noted property. Please ensure you have read all the terms and conditions before signing. In the event of incapacity of a registered owner, their Power of Attorney for property may sign this agreement on their behalf.

I/We agree to the following terms and conditions:

- **I/We will repay the sum of all outstanding taxes deferred under this agreement, as well as the \$200 administration fee, on the date of termination of this agreement** (at the end of the grace period or upon the sale of the property, whichever is earlier). _____
(Initial Here)
- I/We agree to notify the Local Municipality in the event of the death of a registered owner or when the property is sold, transferred or otherwise disposed.
- I/We agree that the \$200 administration fee will be added to the value of taxes deferred.
- I/We will not assign any interest in this agreement or any right or benefit received under this agreement.
- I/We, as the registered owner(s) of the property identified in the application, certify that the above information provided in the application is true, accurate and complete and that the property for which the tax deferral is sought meets the requirements of the program.
- I/We authorize third parties to release information to the Local Treasurer required to determine my/our eligibility for the full property tax deferral program.
- I/We authorize the Treasurer of the Local Municipality to release all information provided to me/us pursuant to the application for full property tax deferral to the Regional Treasurer.



- I/We acknowledge that I/we have had an opportunity to receive independent legal advice and representation in relation to making this application for full property tax deferral.

Applicant Name:	Date (YYYY/MM/DD):	Signature:
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Personal information is collected on this form pursuant to Halton Region By-law No. 20-16, as amended, and will be used for all purposes related to the administration of the Older Adults Property Tax Deferral Program. This includes, but may not be limited to, determining your eligibility for the program and coordinating your application between the Local Municipality and Halton Region.

FOR OFFICE USE ONLY

Municipality:	Application No.:
Tax Deferral Year:	Date Received: