Application for Tax Exemption – Societies that lease from the City Tax Year 2025

The personal information on this form is collected for the purpose of an operating program of the City of Surrey as noted in Section 26(c) of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection and use of this information, please contact Legislative Services at 604-591-4132.

PROVINCE OF) BRITISH COLUMBIA)	IN THE MATTER OF THE TAXATION EXEMPTION BYLAW PURSUANT TO SECTION 224(2)(b) OF TH COMMUNITY CHARTER IN THE CITY OF SURREY (exemption from taxation under Annual Property Tax Bylaw for tax year 2025)		
I,of	(Address & Postal Code)		
Telephone No/ (Work) (Home)	e-mail		
in the Province of British Columbia, DO SOLEMNI	LY DECLARE THAT		
(a) I am the(position currently I	of the		
(position currently l	and as such		
have knowledge of the facts hereinafter depose exemption application is being made;	ed with respect to the subject property for which a tax		
(b) The property is in compliance with City bylaws	s, policies and regulations;		
(c) All of the information provided below and mat application are complete, true and correct in a			
	t a permissive property tax exemption for a property se property for an exemption change at any time.		
AND I make this solemn declaration, conscientiou same force and effect as if made under oath, and b	asly believing it to be true and knowing that it is of the by virtue of the CANADA EVIDENCE ACT.		
DECLARED before me at Surrey in the Province of British Columbia this day of, 2024.	((((
A Commissioner for taking Affidavits within British Columbia or	(Signature of Applicant (
A Notary Public in and for the Province of British	Columbia (Name of Applicant (Please Print) (
	(Title of Applicant		
	(Organization		

PART A: Applicant Information Full name or title of organization: Registered Owner: City of Surrey Property Address: _____ Contact Person (provide contact information for up to two people that staff can contact regarding the submission as necessary). Name: Name: Daytime phone no: Daytime phone no:_____ e-mail: _____ e-mail: 5. Registered Charity Number: _____ **PART B: General Information** 1. Is this a new application for a permissive property tax exemption: □ Yes □ No 2. Does the lease agreement indicate that the lessee is responsible for paying property taxes: □ Yes □ No How long is the term of the lease: How many years/months remain on the term of the lease: 5. Has there been any change in status or use of the building or property in the last 12 month: □ Yes □ No If yes, please explain below (use additional paper as attachment as necessary):

the type of buildings, their ing Type and Use Ind number of parking available on site hany people live in any buildis the square footage of the C: Services Information at is the principal use of the	Gravel:ding(s) on the property?		Gross Floor Area
nd number of parking available on site nany people live in any build is the square footage of the E: Services Information	Gravel:ding(s) on the property?		
available on site nany people live in any build is the square footage of the C: Services Information	ding(s) on the property?	Blacktop:	Undeveloped:
available on site nany people live in any build is the square footage of the C: Services Information	ding(s) on the property?	Blacktop:	Undeveloped:
is the square footage of the	living area?		
E: Services Information			
at charitable and/or outread	ch services do you provid	e to the residents	of Surrey?
Yes	□ No	ment as necessary	y):
	services provided free of ch Yes	services provided free of charge: Yes No	

Program	Dates and Hours of Operation
	on a complementary extension to City services and programs?
How is your organization	on accessible to the public? How is the public made aware of your servic
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Specify the number of u	on accessible to the public? How is the public made aware of your services as sers of your service during the most recent fiscal year. Of these users, or are residents of Surrey and advise how you know they are Surrey reside
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PART D: Financial Information

Activity		Organization or Operator		Fee charged		Annual incom
Have you applied for or organization? (For examunited Way, private do ☐ Yes	nple, Federal or	Provincial	Government, B.C			
Funding Agency	Type of C Funding	Grant or	Amount		Statu	ıs
Indicate any other activadditional paper as atta		s which may	y be pertinent to	your appl	icatior	n (if required, us
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