| Application# | _ |
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2340 Egremont Dr., Strathroy, On., N7G 4H6

Application for Adjustment of Taxes for the Year _____

| Under | Section 357 \square or Section 358 \square of the Municipal Act | t, 2001 | |
|---|---|--|--|
| Assessed Address | Roll Number | | |
| Name of Assessed Person | | Telephone No. | |
| Mailing Address of Assessed Person | | Postal Code | |
| Name of Applicant | | Telephone No. | |
| Mailing Address of Applicant | | Postal Code | |
| REASON FOR APPLICATION (Check appropriate box | x – ONE only) | | |
| ☐ Ceased to be liable to be taxed at rate it was taxed - s. 357(1)(a) ☐ Q Mobile unit removed - s. 357(1)(e) | | | |
| ☐ Became exempt - s. 357(1)(c) ☐ Gross or manifest clerical error - s. 357(1)(f) | | or s. 358(1) | |
| Destruction or damage - not voluntary - s. 357(1)(d)(i) Repairs/Renovations preventing normal use for a period of 3 months - s. 35 | | or a period of 3 months - s. 357(1)(g) | |
| ☐ Destruction or damage - (substantially unusable) s. 357(1)(d)(ii) ☐ ☐ | | | |
| Details of Reason | | | |
| | | | |
| Period Tax Relief Claimed: From | ToDate | | |
| Applicant's Signature | | | |
| | TREACURER/C REPORT | | |
| Original RTC/RTQ | TREASURER'S REPORT Original Current Value | | |
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| Comments | | | |
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| Name of Treasurer (Please Print) | | | |
| Signature of Treasurer Date | | | |
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| DEPARTMENT USE ONLY | | | |
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