



7030 Trans-Canada Highway
Duncan, BC V9L 6A1 Canada
www.northcowichan.ca
T 250.746.3101
F 250.746.3313

**Permissive Tax Exemption Application
(2024-2027)**

NOTE: Applicants may be requested to attend a Committee of the Whole meeting in September as part of the application process

Please submit application to the Finance Department

Director of Finance
Municipality of North Cowichan
Duncan, BC V9L 6A1
Fax. 250.746.3133
Email: finance@northcowichan.ca

APPLICATION DEADLINE: AUGUST 1

The following information must be provided to Municipal Hall, either in person or by email, by the application deadline for Council's consideration. **Late applications will not be considered.**

SECTION 1: GENERAL INFORMATION

APPLICATION DATE: _____
FULL NAME OF ORGANIZATION: _____
MAILING ADDRESS OF ORGANIZATION: _____
LEGAL DESCRIPTION:
Lot: _____ Block: _____ Plan: _____
TAX ROLL NUMBER: _____ PID: _____
CIVIC ADDRESS OF PROPERTY (if different than mailing address): _____

In what ways is your organization registered? (*Applications will not be considered from societies who are not in good standing and may be asked to provide proof of good standing and compliance.*)

- Not for profit (registered under *Societies Act of BC*)
- Not for profit (CRA registered)
- Registered Charity
- Other, please specify.



SOCIETY NUMBER: _____ BUSINESS NUMBER: _____

REGISTERED CHARITY OR NON-PROFIT ORGANIZATION NUMBER: _____

Organization Executive:

Title	Name	Phone No.
President		
Secretary		
Treasurer		

CONTACT DETAILS:

Contact Person & Title: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Did this property receive a Permissive Tax Exemption in previous years?

- YES YEAR(S) _____
- NO

SECTION 2: ORGANIZATIONAL INFORMATION

1. What is the nature of your organization?

- Non-profit organization
- Charitable/philanthropic organization
- Athletic or Service Club/Associations (including golf course)
- Care facility/registered assisted living residence
- Partner of the municipality by agreement under s. 225 of the *Community Charter*
- Other local authority
- Place of public worship (and land surrounding exempt building)
- Senior's home

2. To the best of your knowledge, is your organization in compliance with all municipal policies, bylaws and other applicable regulations (i.e., business licencing, zoning)?

- YES
- NO

If no, please explain: _____

3. Describe the goals and objectives of your organization: _____

4. Do the objectives/goals of your organization align with any or all of North Cowichan's Strategic priorities?
YES _____ NO _____

If yes, please explain: _____

5. Describe the activities your organization carries out that provide a valuable contribution to the community?

6. How does your organization foster diversity, promote inclusivity, and/or champion conservation?

7. Identify the number of persons served by the organization within the Municipality of North Cowichan annually.

8. Is membership or enrolment restricted in any way? YES _____ NO _____

If yes, please explain: _____

9. Provide examples of programs or services aimed at reducing disparities and/or barriers to access, if applicable?

10. How does volunteer engagement play a role in delivering services and supporting your organization's objectives?

11. Please describe any programs or services your organization offers, if applicable, that specifically aim to promote equity and inclusivity within the community.

SECTION 3: PROPERTY INFORMATION

1. Is the organization the registered owner of the property for which the exemption is being requested?

- YES
- NO

2. If no, is the organization a lessee under a lease which requires direct payment of the property taxes to the Municipality of North Cowichan?

- YES
- NO

If yes, please attach a copy of the lease.

- 3. Does anyone live in the building, or do you have any 3rd party agreements including rental or use of the building, parking lot or services rendered?

YES _____ NO _____

If yes, please attach agreement(s) and indicate the following:

Leased to	Sq. Footage leased	Rate Charged

- 4. If your organization offers program or services, are they accessible to any member of the public?

SECTION 4: FINANCIAL INFORMATION

- 1. Does your organization have revenue generating activities on your property (i.e., hall rentals, catering, daycares, preschools, parking lots, etc.)?

YES _____ NO _____

If yes, please attach a Fee Schedule and indicate the following:

Activity	Organization/Operator	Annual Income

- 2. Is your organization run by volunteers, paid staff, or a combination of both?

Number of employees: Full-time: _____ Part-time: _____ Number of Volunteers: _____

- 3. Have you received grants from the Municipality of North Cowichan, Federal or Provincial government, regional government, Crown Agencies, or other funding agencies in the last 3 years?

YES _____ NO _____

If yes, please indicate the following:

Date Received Grant	Amount Received	From	Purpose

4. Please list other sources of revenue not covered, such as membership fees charged or fundraising, etc.

5. Prior year actual operating expenses \$ _____

6. Prior year actual operating revenues \$ _____

7. Current year annual operating budget of organization (attach a copy) \$ _____

8. Projected annual operating budget of the organization for the year of requested exemption \$ _____

A copy of the organizations most recent financial statements must be included with the application, along with a copy of the projected income and expenses.