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**CORPORATION OF THE TOWN OF MATTAWA  
PROPERTY TAX DEFERRAL PROGRAM APPLICATION**

***Complete the following information and mail this application to the Town of Mattawa  
Tax Department, PO Box 390, 160 Water St, Mattawa, ON P0H 1V0.  
Phone: 705-744-5611 Email: info@mattawa.ca***

I am applying as: \_\_\_\_\_ a Senior \_\_\_\_\_ a Person with a Disability

Date of Application: \_\_\_\_\_ Tax Year: \_\_\_\_\_ Roll No. 4821-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

**PROPERTY OWNER(S) INFORMATION:**

Name of Owner(s) \_\_\_\_\_

Date of Birth (Seniors only) \_\_\_\_\_

Spouse's Date of Birth (Seniors only) \_\_\_\_\_

Property Address: \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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**Low-Income Senior Applicant:** Please attach copies of the following documents for eligibility verification:

- Birth Certificate
- Proof of receipt of payments under the Guaranteed Income Supplement (GIS) as established under Part II of the *Old Age Security Act (Canada) as amended*.

**Low-Income Person with a Disability Applicant:** Please attach proof of receipt of assistance paid under the *Ontario Disability Support Program Act, 1997 as amended*. (include copies of stubs.)

**Important Information:**

- The property Tax Deferral Program applies to current taxes and not to tax arrears.
- Any property tax arrears must be paid in full prior to enrollment.
- The undeferred portion of taxes must be paid in full.
- The deferred amount must be in excess of \$100.00.
- The application must be filed annually.
- The owner and/or spouse must occupy the property.

**Statement to be Signed by Applicant:**

- I occupy residential property in the Town of Mattawa and have been assessed as owner of such property for at least one year immediately preceding the date of this application.
- I acknowledge this property is my principle residence and I have not applied for a tax deferral on any other property this year.
- I agree to notify the Town of Mattawa of any changes that would affect my eligibility for the Property Tax Deferral Program.
- I understand that the deferral amount is a special lien registered against my property and must be paid to the Town of Mattawa once the property changes ownership ceases to be occupied as my principle residence, or if I cease to be eligible for the tax deferral under this program. I agree to notify the Town of Mattawa if the property changes ownership, if I cease to occupy it as my principle residence, or if I cease to be eligible for the tax deferral under this program. I acknowledge that the tax deferral cannot be bequeathed.
- I further grant the Town of Mattawa permission to independently verify any documentation provided within this application.
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Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date: \_\_\_\_\_