



Application for Property Tax Exemption

For a private school premises used in connection with school purposes and property held by the operator of a private school registered under the *School Act* to be considered only under MGA section 362(1)(c)(ii)

The City of Calgary Assessment & Tax (8002), P.O. Box 2100, Station M, Calgary, AB T2P 2M5 PH: 403.268.2888

In completing this application, it may be necessary to provide certain answers in an attachment, if sufficient room is not available. Please clearly mark your attachments with the section and question numbers you are answering. Thank you.

Application deadline September 30th of the year preceding the taxation year.

PROPERTY INFORMATION (required by November 30th of the year preceding the taxation year) 1. Name of property owner Mailing address of property owner Tel Fax Address of property for which exemption is requested A) Does the private school occupy ☐ the entire property ☐ portion of the property B) For exactly how many square feet on this property is "exempt from taxation" status being requested? Sq. Ft. Is there a lease, license or permit in place that confirms the portion of the property occupied by the organization? If Yes, provide a copy. For what specific purpose is the above property used (e.g. administration, fund raising, recreation, meeting rooms, etc.)? Please ensure a graphical map of the area is also included as requested in Section VII of this application form. This map must clearly describe the area for which exemption is requested, as well as the uses that take place on separate parts of this area. 7. What is the commencement date of operations? Does the lease requested in question #5 confirm occupancy and termination dates? ☐ Yes □ No If no, please provide occupancy and termination dates. Is any portion of the area described in question #6 occupied or used by another organization or individual? Yes ☐ No If Yes, please provide details. 9. In what type of buildings is the private school located? ☐ Office ☐ Residential ☐ Retail ☐ Special Use ☐ Warehouse ☐ Other (Please Specify) II. BUSINESS PREMISES INFORMATION 1. Name of Business Owner (organization applying for exemption) Mailing Address of Business Owner City Province Postal Code 3. Address of requested exemption premises **Business Identifier**

III. PRIVATE SCHOOL INFORMATION

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1.	Name of private school holding and using the facility for which exemption from taxes is requested						
2.	Private school's objectives/purposes						
3.	Act under which Private School is established or incorporated as a non-profit organization. Please provide copy of registration.						
٥.	Act under which Private School is established of incorporated as a non-profit organization. Please provide copy of registration.						
4.	Does the private school have registered charitable status with Canada Revenue Agency (CRA)? Yes No						
	If Yes, provide registration number.						
5.	Does the private school receive funding from external sources?						
	If Yes, please provide details in an attachment.						
6.	Has this private school received a tax exemption in previous years?						
0.	If Yes, was it for this property? Yes No						
	If No, please provide the address(es) of your other exempt location(s) -						
	Is the private school still occupying space at this location(s)? ☐ Yes ☐ No						
	If No, please provide the date the private school moved out						
DDC	PERTY USE INFORMATION						
1.	In a typical month, how many hours is the property open and available for use?						
2.							
3.	In a typical month, for how many hours is the property actually used:						
	A) For activities co-ordinated by the private school or the purpose under which this application is made? ———						
	B) For other purposes (e.g. used by other organizations, or individuals, hall rentals, activities co-ordinated by						
	other organizations)						
1	Under any circumstances, are the users of the property required to pay a fee? Yes No						
4.	If Yes, please provide details.						
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5.	Are there any memberships related to the use of the property? Yes No If Yes, please provide details.						
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6	Are there any reasons why company would be denied access to the property? (e.g. age, culture, others existing chility to new etc.)						
6.	Are there any reasons why someone would be denied access to the property? (e.g. age, culture, ethnic origin, ability to pay, etc.) Please be specific.						
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<u> </u>							
7.	Please provide photocopies of the actual schedule used to co-ordinate the uses of the property (3 months records minimum).						
8.	Do you have a policy to allow members of the general public who cannot meet the fee or other requirements to continue to use						
	the facility?						
	Yes No						
	If Yes, please provide details or a copy of your policy.						

IV.

EI.	AIL COMMERCIAL,	LICENSED	AREAS												
1.	Are any goods, food bevera	Yes, please no	te that this area is ter	med a "retail o		rea".] No								
2. Specifically, what goods or services are sold from the retail commercial area? 3. Who operates and occupies the retail commercial area? The non-profit organization making this application Other organization or individual – please name															
								 If the organization is the operator of this area, for what purpose is the net income from the retail commercial area used? Are the goods or services provided in the retail commercial area in the facility similar to goods or services provided by other organizations or businesses? No If Yes, please provide a list of these organizations or businesses. 							mmercial area used?
															ervices provided by other
6.	Is an area within the facility licensed under the Alberta Gaming and Liquor Regulation AR (143/96)? ☐ Yes ☐ No														
	If Yes, please specify and supply a copy of the licence.														
		Gaming				Liquor									
	Class	Area	Sq.Ft.	CI	ass	Area _	Sq.Ft.								
	ITACT INFORMATIO ntact Name	<u>N</u>	Position With Orga	nization	Telephone		Facsimile								
					'										
Pre	ferred Mailing Address		City	Province	Postal Code		Email								
Organization's President Organization's Treasurer					Telephone										
					Telephone										
	HER REQUIRED INF	ORMATIO													
	Certificate of Incorpo Copy of approval lett School Act Copy of most current Confirmation of chari Current applicable le	ration as a r er from Albe t financial statable status ase, licence	non-profit organiz erta Education col atements with Canada Rev or permit	nfirming that venue Agen	•		ol is registered under the								
L	Plan showing the use a. any separate use, office sto	areas and tl	ne different purpo		ch they are	used (e	e.g. the exempt purpose								
	b. the "retail con c. the Gaming a A hand drawn g	nmercial are and/or Liquor	a" if there is one; licensed area, if		•										
	If the property is held that confirms the pro	l under a lea perty owner:	ise, licence, or pe	ermit, a lette	r from prop	erty ow	ner to the private schoo								
	the amount o	that, if the pr f taxes attrib	operty qualifies f	empt from ta	xation" por	rtion of	s, The City will determine the property based on								

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	zation making this application the full benefit of any tax exemption						
extended as a result of this application Current list of top three employees' titles and their annual remuneration (except for organizations CRA registered charitable status)							
	rt of any question posed on this application must also be supplied. elating to your organization						
	Important Notice						
right to file a complaint against the taxable	failing to provide adequate information you may lose your status of your property or business. If you do not submit a tion with supporting documentation, your property or						
It certify that I am authorized to submit this application on behalf of the organization, and that the information provided on this application form, and as attachments to this form, is true and accurate in every respect and that all information required under Section VII of this application is included. I understand that the application will only be considered at such time as the responses to the application's questions are complete in every respect and that all additional information requested as part of the application's questions, or in Section VIII, have been provided. I understand also that the application will only be considered under the "exempt from taxation" classification to which it refers.							
Name (Please Print)	Date						
Position	Signature						
	City of Calgary						

Assessment & Tax (8002)
Property Exemptions (Data)
P.O. Box 2100, Station M,
Calgary, AB T2P 2M5

PH: 403.268.2888 or email: Assessment.Exemptions@calgary.ca

Your personal information is being collected for the purpose of determining property tax exemption eligibility. This personal information is collected pursuant to Section 295 of the Municipal Government Act, Section 16 of the Community Organization Property Tax Exemption Regulation, and Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act of Alberta. For questions concerning this collection, please contact the Information Management Strategist in Assessment & Tax at 403-268-2888, The City of Calgary, Assessment & Tax (#8002), 2924 - 11 Street NE, PO Box 2100, Station M, Calgary, AB T2P 2M5

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