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APPLICATION/DECLARATION FOR PROPERTY TAX ALLOWANCE
(Residential Property Tax Relief Act Section 6.1(1))

Property Account Number							

APPLICANT INFORMATION (For more information call 1-888-762-8600)

Applicant's Social Insurance Number							
Spouse's Social Insurance Number							

Name of Applicant (Must be Assessed Owner on January 1 of each year and at time of application)

Mailing Address

Postal Code

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Location of Property

Marital Status on January 1 of year of application Married Single Separated Divorced Widowed Common Law

I have been the registered Owner of this property since (Year) _____ (Month) _____ (Day) _____

APPLICANT INCOME INFORMATION

Income reported **must** be the Total Taxable Income for **both** the applicant and spouse/co-habitant spouse from Line 26000 of the Income Tax Return for the **year prior to the year of application**. **Combined** Total Taxable Income of applicant and spouse **cannot exceed amounts indicated in box E** in the year prior to the year of application.

Taxable income up to \$22,000..... up to a maximum of \$300.00

Taxable income between \$22,001 - \$25,000 up to a maximum of \$200.00

Taxable income between \$25,001 - \$30,000 up to a maximum of \$100.00

*** ONLY RECORD THE INFORMATION FOR THE YEARS YOU WISH TO APPLY FOR**

A	B	C	D	E	F
*Year of Application	Total Taxable Income of Applicant	Total Taxable Income of Spouse or Co-Habitant Spouse	Combined Total Taxable Income	Maximum Combined Total Taxable Income	Office Use Granted (1, 2, 3)
2024	Line 26000 of 2023 income tax = \$	Line 26000 of 2023 income tax = \$		\$30,000	
2023	Line 26000 of 2022 income tax = \$	Line 26000 of 2022 income tax = \$		\$30,000	
2022	Line 26000 of 2021 income tax = \$	Line 26000 of 2021 income tax = \$		\$30,000	
2021	Line 26000 of 2020 income tax = \$	Line 26000 of 2020 income tax = \$		\$30,000	

I understand that the above information **will be verified with Canada Revenue Agency** and that my property tax account balance may be adjusted upon verification. I recognize that if an application is **not submitted**, the allowance will not be granted. Anyone who knowingly makes a false or misleading statement in an application is guilty of an offence and is liable on conviction to a fine of not more than \$5000.00.

(Signature of Applicant/agent) (Date) Tel (Home): _____
Tel (Work): _____

FOR OFFICE USE ONLY

Approved Granted Not Approved Verified By _____

Mail to SNB Regional Assessment Office **OR** Apply Online:

<https://www.pxw1.snb.ca/SNB9000/product.aspx?ProductID=A001PSN0001&l=e>

PO 5001 Bathurst E2A 3Z9	PO 5001 Campbellton E3N 3H5	PO Box 1040 Hampton E5N 8H1
PO 5001 Miramichi E1V 3N3	PO 5001 Saint John E2L 4Y9	PO Box 1998 Fredericton E3B 5G4
PO 5001 Richibucto E4W 5R5	PO 5001 Woodstock E7M 5C6	101-73 Milltown Blvd St. Stephen E3L 1G5
PO 5001 Moncton E1C 8R3	PO 5001 Edmundston E3V 3L3	