



## Schedule "A"

### Application for COVID-19 Property Tax Financing Program

#### Commercial Property

Civic address of property: \_\_\_\_\_

Municipal Account Number (as it appears on your tax bill): \_\_\_\_\_

Name of owner (as it appears on your tax bill): \_\_\_\_\_

Mailing Address (include civic number): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

#### **I declare that:**

- a) I have not received compensation from business interruption insurance toward payment of property taxes in relation to the above property;
- b) The property is not occupied by a daycare centre in receipt of federal or provincial funding or other emergency funding;
- c) The property is not used for a landfill, pipeline, managed forest, or parking, and is not commercial vacant land;
- d) There is no active tax agreement in place with the Municipality with respect to property taxes for the property through legislation or bylaw;
- e) The property is now owned by a non-profit organization that is funded by the Municipality and the property is not partially exempted from property tax; and
- f) The property is not managed under a payment-in-lieu program.

#### **Complete one of I or II below**

##### **I. I also declare that:**

- a) I have experienced financial hardship through loss of revenue of my business or building located on the property as a result of the State of Emergency declared by the Province of Nova Scotia related to COVID-19;
- b) I have experienced a total business revenue decrease by at least 30% for the period of April and May 2020 as compared to the same period in 2019 operated from the property;
- c) The total taxable 2020 assessed value for the property is equal to or less than \$500,000.00;

Dated this \_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Signature of owner

Enclose: A signed document that includes the total revenue for the specific business operated from the property for April and May 2019 and the total revenue for April and May of 2020 for the same business and that the total revenue proves to have decreased by at least 30% (thirty percent) from 2019 to 2020.

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**II. I also declare that:**

- a) I have experienced financial hardship through loss of revenue of my business or building located on the property as a result of the State of Emergency declared by the Province of Nova Scotia related to COVID-19;
- b) The total taxable 2020 assessed value for the property is greater than \$500,000.00, but (*choose any of the following that apply*):

- i. I am a tourism operator registered with the Tourism Accommodations Registration Act and the property is used for tourist accommodations (e.g., hotels, motels, bed and breakfasts);
- ii. I carry on the business of an automotive or leisure/recreational vehicle dealership on the property;
- iii. I use the property as a private or non-profit recreation facility (e.g. golf course, indoor playground, campground, racing venue);
- iv. I carry on a business on the property in the hospitality industry (e.g. bar, café, restaurant, coffee shop);
- v. I carry on a business on the property in the service industry (e.g. hair salon, nail salon, gym, tattoo parlour);
- vi. I carry on a business on the property as a health care provider (e.g. dentist, naturopath, chiropractor, physiotherapist, physician), and that business has been required to reduce hours as a result of the State of Emergency.

Dated this \_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Signature of owner