

District of Peachland

5806 Beach Avenue Peachland, BC V0H 1X7 250-767-2647 www.peachland.ca

PERMISSIVE TAX EXEMPTION 2025 RENEWAL APPLICATION FORM Not-For-Profit Organizations

Deadline for submissions August 15, 2024

- Applicants may be requested to submit additional information at a later date such as the most current Financial Statements, Financial Budget, Not-for-Profit Organization Return or Registered Charity Return.
- In order to be considered for a future Permissive Tax Exemption, organizations are reminded that it is their responsibility to complete and submit a renewal application each year in addition to the comprehensive application required every 5th year.
- Upon submitting a renewal application, you will be notified only if there is a change to your organization's Permissive Tax Exemption status.

Application Date	_ for Taxation Year							
Business Number	_ Registered Society Number							
Full name or title of Organization:								
2. Mailing address of Organization:								
3. Civic address of property if different than mailing address:								
4. Property legal Description:	Roll #							
5. Name, phone number & email address of Contact l	Person:							
6. Has the Board of Directors changed since last year	r's application?	Yes	No					

If YES, please attach a list of the current Board of Directors.



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7. Have any of the following chan	ged since the last y	ear's comprehensi	ve application o	r renewal ap	plication	:		
Change in registered owner of property?					Yes		No	
Change in principal property use?					es	No		
Change in organization's purpose or goals?					es	No		
Change in programs offered?				Y	Yes		No	
Change in grant funding?					Yes No			
Change in Registered Charity or Not-for-Profit status?					Yes No			
Change in persons residing on property?					es	No		
If you answered YES to any of the	e questions above,	please explain:						
			· · · · · · · · · · · · · · · · · · ·					
8. Has your organization made ch	anges to any 3 rd pa	arty agreements inc	cluding rental or	use of the b	uilding(s), parking lot	(s) or	
services rendered?			-	Y	′es	No		
If YES, please complete the follow	ving:							
Facility Name	Sq Ft of Leased Premises	Leased Space Business Type	Rate Charged			Cancelle Agreeme		
				Yes	No	Yes	No	
				Yes	No	Yes	No	
I understand that all required inform be considered for a Permissive Tax	nation must be attache Exemption.	ed to this application	and that additions	al information	may be re	equired in ord	er to	
I understand that if this application District of Peachland if any change	is approved in full or a s occur with respect t	in part for the 2025 t to ownership or princ	ax year, it is our o	organization's operty during t	responsil that time.	bility to contac	t the	
Applications are run on a 5 year cy required. The comprehensive appl years in between.	cle. Every fifth year (ications will be due in	(in addition to the init 2021, 2026, 2031 e	ial application) a l tc. An annual rer	new comprehe newal form wil	ensive ap I be requi	plication will k ired in each o	e f the	
I certify that I am a current Board M the best of my knowledge.	lember of this organiz	ration and that the inf	ormation provided	d in this applic	ation is tr	rue and accura	ate to	
Name		Signature						
Position		Date						
i								