



APPLICATION FOR PERMISSIVE TAX EXEMPTION

2023 Taxation Year

DETAILS OF ORGANIZATION

Name of organization: _____

Mailing address: _____

Applicant name: _____

Phone: _____ Email: _____

Registered charity: No Yes Registration #: _____

Incorporated society: No Yes Incorporation #: _____

Folio: _____ Parcel Identifier Number (PID): _____

Civic description of the parcel for which exemption is requested (if different from the mailing address):

Address: _____

City, Province: _____ Postal code: _____

The lands are registered in the name of: _____

EXEMPTION CRITERIA

1. Exemption is requested under Section 224(2), clause(s) _____ of the *Community Charter*.

2. How does the use of the property meet the selected clause(s) of Section 224(2) of the *Community Charter*?

3. Why is a permissive tax exemption needed? Identify specifically how the exempted taxation funds will be used.

4. Is your application for ancillary or surrounding lands?

Yes No

· If yes, provide the area in square meters for which a permissive tax exemption is being requested: _____

· If yes, is there potential for the ancillary and surrounding lands to be subdivided from the portion of the property that is statutorily exempt and developed?

Yes No

5. Is any part of the property used for non-charitable, non-philanthropic or for-profitable purposes? Yes No

· If yes, provide details below.

COMMUNITY BENEFIT

6. Does your organization provide services that result in community benefits to residents of the District of West Vancouver ("District") who are not directly affiliated with your organization?

Yes No

· If yes, provide details below.

7. Does your organization sponsor or financially support individuals or other organizations in the District?

Yes No

· If yes, provide details below.

8. Does your organization provide services or space to other charitable, philanthropic and not-for-profit groups/organizations?

Yes No

· If yes, please provide details in [Appendix 1](#).

9. Are the services provided by your organization available to all residents of the District?

Yes No

· If no, provide details below.

10. Please provide the approximate number of individuals your organization served in the last calendar year and where they resided:

District of West Vancouver: _____

District of North Vancouver: _____

City of North Vancouver: _____

Other: _____

11. Is your organization willing to assist with the programs and services that result in community benefit?

Yes No

· If yes, check all amenities that may be provided by your organization and fill out the details in [Appendix 2](#):

Meeting space for District of West Vancouver events

Visitor parking for District of West Vancouver events

Space for arts groups' programs, presentations or performing purposes

Meeting and program space for other not-for-profit groups

Community garden space

Allowing activities on adjacent territory

Other (please specify):

12. Describe other grants and/or financial contributions and in-kind support received from the District of West Vancouver in 2021-2022. Please include all contributions such as community grants, donation/loan of District equipment or goods, staff support for events, free use of space for meetings, events or equipment storage, advertising, and so on.

13. Do you rent out any part of the property that is within the area in which you are requesting a permissive tax exemption?

Yes No

- If yes, please describe the rental and cost share arrangement(s) and the amount of revenue that your organization receives annually.

14. If your organization had a surplus in 2021, explain how the surplus was allocated.

15. What per cent of the 2021 surplus was used on projects or initiatives in the District?

_____ %

What per cent of the 2021 surplus was used on projects or initiatives outside of the District? _____ %

16. Do you have current plans to sell or otherwise change the ownership and operation of the property that is within the area in which you are requesting a permissive tax exemption?

Yes No

- If yes, provide details below.

ADDITIONAL INFORMATION

Please provide a copy of the following:	Attached
Most current financial statements	<input type="checkbox"/>
Approved budget for the current year	<input type="checkbox"/>
Scale drawing of property that includes buildings, parking lots, landscaping, playgrounds, fields, and so on	<input type="checkbox"/>
Appendix 1 (if applicable)	<input type="checkbox"/>
Appendix 2 (if applicable)	<input type="checkbox"/>

CERTIFICATION

I certify that to the best of my knowledge the information provided in this tax exemption application is accurate and complete, and is endorsed by the organization which I represent.

Every building on the lands is in use and continues to be set aside for the purposes described in the clause under Section 224(2) of the *Community Charter* for which exemption is claimed.

Signature

Date

Name

Title

Freedom of Information and Protection of Privacy Act — Notice of Collection and Use: Personal information on this application is collected by the District of West Vancouver (“District”) under section 26(c) of the Freedom of Information and Protection of Privacy Act for the purpose of assessing permissive tax exemption applications and compiling a registry of available community-use space. If your application indicates that you have space available for community use, your contact information will be added to the registry and shared with third-party non-profit organizations so that they can contact you regarding that community-use space. Personal Information on this application will not be used or disclosed other than for the purpose for which it was obtained, pursuant to FIPPA sections 32-33.2.

Appendix 1

Services or space provided by the applicant to other charitable, philanthropic and not-for-profit groups/organizations.

1. Type of benefit being provided (for example, meeting room, parking, financial assistance):

2. Recipients—organizations/individuals that have received benefits provided by the applicant.

- Name: _____
- Contact person (for organizations): _____
- Contact information (phone, email): _____

3. Amount of benefit that was provided (for example, how often the space was used or how much funding was received)

4. When were the benefits provided? _____

5. Do you plan to continue providing benefits to this organization/individual?

Yes No

Add a separate sheet if needed to list all recipients/benefits provided to them.

Appendix 2

The applicant is willing to assist with the programs and services offered/supported by the District of West Vancouver by providing (check all that apply):

Space for meetings, group programs, performing purposes, and so on.

Types of room (for example, meeting room, conference room, classroom):

Room 1: _____

Room 2: _____

Room 3: _____

Room 4: _____

Size:

Room 1: _____ (square meters) _____ (maximum occupancy)

Room 2: _____ (square meters) _____ (maximum occupancy)

Room 3: _____ (square meters) _____ (maximum occupancy)

Room 4: _____ (square meters) _____ (maximum occupancy)

Availability:

Date: _____ (day of the week/month)

Time: from _____ to _____ (time of day when available)

Restrictions: _____ (for example, no food allowed)

Accessibility: _____ (for example, wheelchair accessible)

Add a separate sheet if needed to specify details

Parking

Number of parking spaces: _____ (total), including ____ accessible parking spaces

Available: _____ (dates, day of the week/month)

from _____ to _____ (time of day when available)

Restrictions: _____ (for example, no truck parking)

Community garden space

Gardening area available: _____ (square meters)

Other facilities/services—please identify:

Type of service/facility: _____

Suggested use: _____

Time of availability: _____

Accessibility: _____

Restrictions: _____

Add a separate sheet if needed to specify details