



SECTION  357 /  358 /  359 APPLICATION  
TO THE COUNCIL OR THE ASSESSMENT REVIEW BOARD

Application/Appeal #:
Taxation Year:

Municipality: City of North Bay Roll Number: 4 8 - 4 4 - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Property Address: \_\_\_\_\_ Applicant Name: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Alternative Number: \_\_\_\_\_

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

Reason for s357 application: (Check one box - applicable to s357 only)

<input type="checkbox"/> Ceases to be liable for tax at rate it was taxed - 357(1)(a)	<input type="checkbox"/> Became vacant or excess land - 357(1)(b)
<input type="checkbox"/> Became exempt - 357(1)(c)	<input type="checkbox"/> Sickness or extreme poverty - 357(1)(d.1)
<input type="checkbox"/> Razed by fire, demolition or otherwise - 357(1)(d)(i)	<input type="checkbox"/> Mobile unit removed - 357(1)(e)
<input type="checkbox"/> <b>Damaged and substantially unusable - 357(1)(d)(ii)</b> (If applying under Sec. 357 (1)(d)(ii) – please complete Page 2 in full)	<input type="checkbox"/> Gross or manifest clerical/factual error - 357(1)(f)
<input type="checkbox"/> <b>Repairs/Reno's preventing normal use (min. 3 months) - 357(1)(g)</b> (If applying under Sec. 357 (1)(g) – please complete Page 2 in full)	<input type="checkbox"/> Gross or manifest clerical/factual error - 358

Details of Reason for s357, s358 or s359 application: \_\_\_\_\_

Effective from: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Applicant Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
(MM/DD/YY) (MM/DD/YY)

ASSESSMENT REPORT: MUNICIPALITY				TREASURER'S RECOMMENDATION TO COUNCIL				
Assessment Roll As Returned		Revised Since Roll Return <input type="checkbox"/>		Assessment Report		School Bd: <input type="checkbox"/> Eng <input type="checkbox"/> Fr <input type="checkbox"/> Other		
		Enter Revisions Below		<input type="checkbox"/> No Change in Assessment		<input type="checkbox"/> S357 Required for Next Year		
RTC/RTQ	2012 Base-year CVA	2016 Base-year CVA	Current Phased Assessment	Revised RTC/RTQ	Revised 2012 Base-year CVA	Revised 2016 Base-year CVA	Revised Current Phased Assessment	Change to Current Phased Assessment
Revised:				Reason for Change: _____ _____				
Reason Original Assessment Revised: _____								

TREASURER'S REPORT ON TAX LIABILITY					
RTC/RTQ	Taxable Assessment Reduction	Tax Rate	Days / Months	Tax Adjustment	Original Levy

Recommended:  No Adjustment  Adjustment  Cancellation  Refund Total Amount \_\_\_\_\_

Comments: \_\_\_\_\_

Treasury Position: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

COUNCIL OR ASSESSMENT REVIEW BOARD DECISION: Hearing Date (MM/DD/YY): \_\_\_/\_\_\_/\_\_\_

Approved  Amended & Approved  Not Approved  Applicant Did Not Appear  Application Abandoned

Reason: \_\_\_\_\_

Appeared for Applicant: \_\_\_\_\_ Appeared for Municipality \_\_\_\_\_

Signature of Council/ARB Member: \_\_\_\_\_ Name/Title: \_\_\_\_\_

Applications under Section 357 or 358 of the Municipal Act, 2001 (the Act) must be accompanied by documentation (proof) sufficient to support a determination of eligibility. Applicants should submit all available documentation with their applications, however, the Municipality reserves the right to request additional information. Completion or submission of an application does not establish eligibility to any form or amount of relief.

Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of Section 357, 358 or 359 of the Municipal Act. Questions about this collection of personal information should be directed to the City Clerk, 200 McIntyre Street East, North Bay (705) 474-0626, ext. 2510. **E-mail questions and/or completed form to [propertytaxes@northbay.ca](mailto:propertytaxes@northbay.ca)**



Sec. 357 (1)(d)(ii) and Sec. 357 (1)(g) ONLY

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

The City of North Bay requires the following in order to initiate a review of the application:

1. Was the closure or renovation to the entire or portion of the building(s)? If a portion(s) define the area(s) by name, square footage, and a drawing showing the location of each within the building(s) and each areas time period affected.
  
2. Was the building(s) closed or reduced hours and/or limited for services? If a portion(s) define the area(s) by name, square footage, and a drawing showing the location of each within the building(s) and each areas time period affected?
  
3. Please share in detail what rendered each space substantially unusable or prevented the normal use of the land for the purposes for which it was used immediately prior, for the property in North Bay.

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