

**Municipality of the District of Lunenburg
10 Allée Champlain Drive, Cookville, NS B4V 9E4**

Telephone 902-541-1348

**APPLICATION FORM
TAX EXEMPTION FOR NON-PROFIT ORGANIZATIONS
As provided by Section 71 (1) of the Municipal Government Act (1998)**

PLEASE PRINT

Date	_____	Assesment Account #	_____
			(please attach copy of tax bill)
Organization Name	_____		
Property Location	_____		
Mailing Address	_____		

Postal Code	_____		
Phone #	_____		
Applicant	_____		
Phone #	_____		

Please attach a brief report of the program, benefit or source of the community

Board of Directors	
Name	Position
_____	_____
_____	_____
_____	_____
_____	_____

I (we) hereby request the Municipal Government to renew our tax exemption for the non profit organization. I (we) also declare that the information contained above and/ or attached to the renewal application is true and correct to the best of my (our) knowledge.

Signature _____ Date _____