

STATE REASON(S) & EVIDENCE FOR REQUEST FOR REVIEW

ENTER THE REASON YOU DISAGREE WITH THE VHT AUDIT DETERMINATION NOTICE.

IF YOU HAVE ADDITIONAL SUPPORTING DOCUMENTATION THAT HAS NOT ALREADY BEEN SUBMITTED, LIST THE DOCUMENTS BEING ATTACHED.

OWNER'S DECLARATION

I, _____ (name of owner) , do hereby declare that the information given in this Request for Review Form and any supporting documents is true, correct and complete in every respect, and I make this request for review conscientiously believing it to be true and knowing it is of the same force and effect as if made under other and by virtue of The Canada Evidence Act.

(A penalty of \$3,500 will be imposed for declarations determined to be deliberately false or misleading in order to avoid VHT)

(MM / DD / YYYY)

SIGNATURE OF PROPERTY OWNER:

DATE:

The personal information on this form is being collected under the authority of the Municipal Act, Section 10 for the purposes of maintaining the integrity and accuracy of our data; and section 338.2(1) for the purposes of determining if a given property qualifies for the vacant home tax. Questions about this collection may be made via email to vht@citywindsor.ca or by calling 311, or 519-255-2489 if outside the city.

OFFICE USE ONLY

REVIEWER NAME: _____
REVIEWER SIGNATURE: _____
DATE REVIEWED: _____

DATE STAMP: