

(6J)



Corporation of the Township of Black River - Matheson
429 Park Lane
P.O. Box 601
Matheson, Ontario
P0K 1N0

RESOLUTION

DATE: January 7, 2019

NO: 2019 - _____

MOVED BY:

| | | |
|----------------------|-----------------------|--------------------|
| Councillor Dubien | Councillor Gibson | Councillor Cumming |
| Councillor De Marchi | Councillor Charlebois | Councillor Riach |

SECONDED BY:

| | | |
|----------------------|-----------------------|--------------------|
| Councillor Dubien | Councillor Gibson | Councillor Cumming |
| Councillor De Marchi | Councillor Charlebois | Councillor Riach |

BE IT RESOLVED that the Council for the Township of Black River-Matheson hereby approves the following application for cancellation, reduction or refund of taxes in accordance with Section 357 of the Municipal Act, as amended;

File No. 18-06, Roll no. 5614 060 010 07600 0000 for reason Demolition/Razed by fire.

CARRIED DEFEATED

MAYOR'S SIGNATURE

Recorded Vote-TO BE COMPLETED BY CLERK ONLY

| | YEAS | NAYS |
|-----------------------|------|------|
| Councillor Dubien | | |
| Councillor Gibson | | |
| Councillor Cumming | | |
| Councillor De Marchi | | |
| Councillor Charlebois | | |
| Councillor Riach | | |
| Mayor Laderoute | | |

X

Cassandra Child
Clerk



CORPORATION OF THE
TOWNSHIP OF BLACK RIVER - MATHESON
429 PARK LANE, P.O. BOX 601, MATHESON, ON P0K 1N0
TELEPHONE (705) 273-2313 TOLL FREE (877) 252-2227 FAX (705) 273-2140
EMAIL: township@blackriver-matheson.com WEBSITE: www.blackriver-matheson.com

NOTICE OF MEETING
RE: APPLICATION FOR CANCELLATION, REDUCTION OR REFUND OF TAXES

November 28, 2018

TO: Dwayne & Wendy Cole

APPLICATION NO: 18-06

ROLL NO: 5614 060 010 07600 0000

ASSESSED MUNICIPAL ADDRESS: 1823 Blue Jay Rd S.

TAXATION YEAR FOR WHICH RELIEF APPLIED FOR: 2018

REASON FOR CANCELLATION, REDUCTION OR REFUND:

Demolition/Razed by Fire

RECOMMENDATION TO MEETING:

Reduction in taxes

TAKE NOTICE that the council of the Township of Black River-Matheson will sit at Council Chamber, 429 Park Lane, Matheson on Monday the 7th day of January 2019 at 6:30pm in the matter of an application made for the cancellation, reduction or refund of taxes with respect to the above-mentioned property for the reasons set forth in the said application.

Signature of Clerk

Application made under Sec 357/358/359 of the Municipal Act, 2001

MPAC's RESPONSE

Owner name(s) COLE, DWAYNE PAUL
 COLE, WENDY LYNN
 Roll number 5614-060-010-07600-0000
 Property location 1823 BLUE JAY RD S
 Property description PLAYFAIR CON 3 S PT LOT 6 PCL 20676SEC
 Municipality/Local taxing authority BLACK RIVER-MATHESON TOWNSHIP

Application number
 Application reason Demolition/Razed by Fire
 Received date August 29, 2018

Claim relief period **From: January 01, 2018 - To: December 31, 2018**
 Taxation year 2018

Current Property Assessment

| Property Classification | 2012 | 2016 | Phase-In Assessment for Taxation Years | | | 2020 |
|-------------------------|----------------|----------------|--|---------------|---------------|---------------|
| | Assessed Value | Assessed Value | 2017 | 2018 | 2019 | |
| OWNR RU R T | 78,000 | 85,000 | 79,750 | 81,500 | 83,250 | 85,000 |
| Total | 78,000 | 85,000 | 79,750 | 81,500 | 83,250 | 85,000 |

Change to the Property Assessment

| Property Classification | 2012 | 2016 | Phase-In Assessment for Taxation Years | | | 2020 |
|-------------------------|----------------|----------------|--|---------------|---------------|---------------|
| | Assessed Value | Assessed Value | 2017 | 2018 | 2019 | |
| OWNR OT R T | 38,082 | 41,500 | 38,937 | 39,791 | 40,646 | 41,500 |
| Total | 38,082 | 41,500 | 38,937 | 39,791 | 40,646 | 41,500 |

MPAC Remarks

Reviewed Sept. 7, 2018. Structure has been removed. Please note that sheds will remain on the property and are being assessed accordingly.

MPAC Representative:
 Date:

Pamela Hicks
 September 07, 2018

RT
 - 41709

APPLICATION

Application Number
18-06

TO THE COUNCIL OR ASSESSMENT REVIEW BOARD

FOR ADJUSTMENT OF TAXES FOR THE FOR THE YEAR

UNDER SECTION 357 OR SECTION 358 OF THE MUNICIPAL ACT, 2001, c. 25

| | | | | | | |
|--|--|--|--|--|--|--|
| Assessed Address 1823 Bluejay Rd | | Roll Number City. Mun. Map Div. Sub-Div. Parcel Prim./Sub. 5614 060 010 07600 | | | | |
| Name of Assessed Person Dwayne Cole | | Telephone No. [REDACTED] | | | | |
| Mailing Address of Assessed Person Bx 866 Iroquois Falls | | Postal Code P0K 1E0 | | | | |
| Name of Applicant Dwayne Cole | | Telephone No. [REDACTED] | | | | |
| Mailing Address of Applicant | | Postal Code | | | | |

REASON FOR APPLICATION: (CHECK APPROPRIATE BOX - ONE ONLY)

Ceased to be liable to be taxed at rate it was taxed - s. 357(1)(a) Sickness or extreme poverty - s. 357(1)(d.1)

Became exempt - s. 357(1)(c) Mobile unit removed - s. 357(1)(e)

Razed by fire, demolition or otherwise - s. 357(1)(d)(i) Gross or manifest clerical error - s. 357(1)(f) or 358(1)

Damaged by fire, demolition or otherwise - (substantially unusable) - s. 357(1)(d)(ii) Repairs/renovations preventing normal use for a period of 3 months - s. 357(1)(g)

DETAILS OF REASON **house razed by fire**

PERIOD TAX RELIEF CLAIMED: From **Jan 1/18** Date To **Dec 31/18** Date

Applicant's Signature **[Signature]** Date of Application **Aug 29/18**

| ASSESSMENT REPORT | | | | |
|-------------------|------------------------|-----------------|-----------------------|----------------------|
| Original RTC/RTQ | Original Current Value | Revised RTC/RTQ | Revised Current Value | Assessment Reduction |
| RT | 81,500 | | | |
| | | | | |
| | | | | |
| | | | | |

SCHOOL BOARD: English French Other

EFFECTIVE DATE >

Comments

Name - Designated Officer (print) _____ Signature _____ Date _____

Name - Assessor (print) _____ Signature _____ Date _____

NO CHANGE IN ASSESSMENT SECTION 357 REQUIRED NEXT YEAR

| REPORT OF TAX LIABILITY | | | | | | |
|-------------------------|-------------------------------------|----------------|-----------|------------|--------------------------|-------------------|
| RTC/RTQ | Taxable Realty Assessment Reduction | Tax Rate | Days (1) | Months (2) | Amount of Tax Adjustment | Original Tax Levy |
| RT | (41709) | .013288 | 12 | | 554.24 | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

NO RECOMMENDATION FOR TAX ADJUSTMENT Reduction Cancellation Refund TOTAL >

Comments

Signature _____ Date _____

COUNCIL OR ASSESSMENT REVIEW BOARD - DECISION MADE UPON ABOVE APPLICATION

APPROVED (Tax to be adjusted accordingly) AMENDED AND APPROVED (Tax to be adjusted accordingly) NOT APPROVED APPLICANT DID NOT APPEAR APPLICATION ABANDONED

REASON: _____

Appeared for Applicant _____ Appeared for Municipality _____

Date of Hearing _____

Signature of Secretary or Board Clerk _____ Signature of Council Rep. or ARB Member _____

The information on this form is collected under the authority of the *Municipal Act, 2001, c. 25, ss. 357 and 358* and will be used for the purposes stated in this application. Questions should be directed to the Municipal Clerk or the Freedom of Information and Privacy Coordinator of the municipality.