



Housing Policy and Programs
1435 Water Street, Kelowna,
BC, V1Y 1J4 250 469-8773
kelowna.ca

Revitalization Tax Exemption

Application

FORM 1220

Date: _____

File Number: _____

CONTACT INFORMATION

Applicant:	
Contact Person:	
Mailing Address:	
Phone:	Fax:
Alternate#	
Email:	

Owner(s):	
Contact Person:	
Mailing Address:	
Phone:	Fax:
Alternate #	
Email:	

- ☐ The applicant is the owner of the subject property(ies) or
- ☐ A signed **Owners Authorization** from the owner(s) is attached, including a copy of the **BC Corporate Summary** or **Article of Directors** demonstrating that you have signing authority on behalf of a numbered company (if applicable).
- ☐ All items in the **Checklist** have been reviewed and relevant documents are attached with this form.
- ☐ **The project's Building Permit is Not Issued/ and has NOT received Occupancy.**

Note: Owner noted above must be consistent with owner listed on the State of Title. The Owners Authorization provided must be from an individual with signing authority for the listed owner.

DESCRIPTION OF PROPERTIES AND PROPOSED DEVELOPMENT

Legal Description (as per State of Title):					
Lot:	Block:	Plan:	Section:	Township:	District:
Street Address:					
Existing OCP Designation(s):					
Existing Use(s):					
Existing Zoning:					
Description of Proposal:					

- ☐ Please attach all requirements listed on the application requirement checklist. Please confirm that the required documents, including all details requested, have been submitted as part of the application.

THE FOLLOWING ASSOCIATED APPLICATIONS HAVE BEEN SUBMITTED:

- ☐ DEVELOPMENT PERMIT NUMBER: _____
- ☐ DEVELOPMENT VARIANCE PERMIT NUMBER: _____
- ☐ BUILDING PERMIT NUMBER: _____

PLEASE REVIEW THE FOLLOWING STATEMENT AND SIGN BELOW. UNSIGNED APPLICATIONS WILL NOT BE ACCEPTED:

I have attached to this application all items in accordance with the relevant application checklist (attached to the application form). I accept responsibility for processing delays caused by incorrect or insufficient submission materials.

APPLICANT'S SIGNATURE: _____

The Personal Information on this form is collected under the authority of the Community Charter and is subject to the Freedom of Information and Protection of Privacy Act. Any questions regarding this collection should be directed to the Department of Housing Policy & Planning, 1435 Water Street, Kelowna, BC, V1Y 1J4, 469-8773.