



**COEUR DE MORINVILLE NON-RESIDENTIAL  
TAX INCENTIVE PROGRAM APPLICATION**

Date: \_\_\_\_\_

Name of Property Owner (as per Land Title)			
Contact Name:			
Mailing Address:	City/Town/Village:	Province:	Postal Code:
Telephone Number (Main):		Telephone Number (Alternate):	
Email Address:			

Legal Description of Lands for Tax Exemption:	Cost to replace required storm, sanitary, and/or water lines required for development:
Development Permit Number:	

I/we, the undersigned, understand the conditions of eligibility and further terms set out in the current Coeur de Morinville Non-Residential Tax Incentive Bylaw, and acknowledge I/we have authority to request taxation exemption on the above-mentioned property.

I/we  DO or  DO NOT provide consent to the Town of Morinville to take and use photographs of the developmental changes to the above-named business for promotional purposes.

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**Office Use Only:**

Roll Number:	Development Permit #:	Development Permit Issue Date:	Development Completion Date:
Previous Assessment:	Current Assessment:	Approved By:	

*Information on this form is collected under the authority of Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act (FOIP), to determine eligibility for the Non-Residential Tax Incentive Program. Questions regarding the collection of this information can be directed to the Town's Information Management/ FOIP Coordinator at 10125 100 Avenue, Morinville, AB T8R 1L6, 780-939-4361.*