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www.quintewest.ca



A Natural Attraction

Tel: 613-392-2841  
Toll Free: 1-866-485-2841  
Fax: 613-392-0714

Dear Ratepayer:

**RE: 2020 ODSP (Ontario Disability Support Program) Tax Credit Application**

You can apply for the ODSP Property Tax Credit for 2020 by mailing or delivering the attached application to City Hall or at the municipal office in Frankford. If you qualify, please complete the attached application form, date and sign Section 7.

Please remember to include the documentation referenced in Section 4.

1. Applicant must solely own and occupy this property as their principle residence.
2. Application Deadline is August 31, 2020.
3. Applicant must be receiving ODSP benefits and must provide proof of the maximum monthly shelter allowance.
4. Applications must be made on a yearly basis.
5. Approved applicants will receive a \$300.00 credit, which the City will apply towards the September tax installment. The applicant is able to claim the total 2020 taxes as billed on the applicant's income tax.
6. For further information please contact the City of Quinte West Taxation Department at 613-392-2841.

Yours truly,

A handwritten signature in black ink that reads "R. Alexander".

Roxanne Alexander  
Supervisor of Revenue & Taxation



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### Application for ODSP Property Tax Credit

Name of Property Owner:	
Name of Spouse if applicable:	
Roll Number:	
Street Address:	
Postal Code:	Telephone No.:
Email Address:	

If you, the applicant, can answer YES to the following questions, please sign and date this application and return to the Tax Department by August 31, 2020. **Applications cannot be accepted electronically.**

Questions:

1. Do you and your spouse (if applicable) solely own this property as your principle address? Yes \_\_\_ No \_\_\_
2. If you are an ODSP recipient, do you occupy this property as your principle residence? Yes \_\_\_ No \_\_\_
3. If your spouse is an ODSP recipient, does your spouse occupy this property as his or her principle residence? Yes \_\_\_ No \_\_\_
4. If you are the applicant or their spouse, are you receiving ODSP benefits, and if so attach the required documentation. Please attach either a cheque stub or a copy of your latest direct bank deposit (DBD) statement from your most recent payment. Yes \_\_\_ No \_\_\_
5. Are you currently receiving the maximum monthly shelter allowance? Yes \_\_\_ No \_\_\_
6. Is this the only property for which you or your spouse (if applicable) have completed an application for the 2020 Credit? Yes \_\_\_ No \_\_\_
7. I, the applicant or agent for the applicant, declare that I can answer YES to Questions 1 through 6 above, and I certify the above information to be true. Yes \_\_\_ No \_\_\_

Signature of Applicant or Agent:

Date:

Personal information on this form is collected under the authority of the Municipal Act, SO 2001, c25, and will be used to process your ODSP Tax Credit application. Questions about the collection of this personal information only should be directed to the Supervisor of Revenue & Taxation. (This form is available in an alternate format upon request).