

Application for 20% Low Income Property Tax Reduction Tax Year 2025

	Tax Year 2025	
Property Address:		
Roll #:	Postal Code:	Telephone Number:
Last Name:	First Name:	Date of Birth (DD/MM/YYYY):
owned by another person. If there	Additional Owner Information if you have is more than one additional owner, pleas of all additional owners and their spouses	se attach a list with the first name, last
Spouse's Last Name:	Spouse's First Name:	Date of Birth (DD/MM/YYYY):
Additional Owner's Last Name:	Additional Owner's First Name:	Date of Birth (DD/MM/YYYY):
Please write your Total Household (include applicant, spouse, and ar	y additional property income).	line 150 from each Notice of
Please write your Total Household Income in the box on the right side (include applicant, spouse, and any additional property income). Statement to be Signed by the Applicant:		\$
	my principal residence which I have or wi that I have not applied under any of these	
l understand that if I am eligible for longer own the property and will re	the Property Tax Reduction Program, I we pay the deferred amount.	vill notify the Town of Torbay when I no
	d in this application is true and agree to nederstand that false or deceptive stateme	
Applicant Signature:	Spouse Signature:	Date (DD/MM/YYYY):
=	count must be in good standing and credit will	
	Deadline for submission is June 27	7, 2025
Office Use:		
Date Received:	Confirmation of Documents:	Date Processed: