

Appendix C

Non-profit and Community based organizations

1. Information about the organization

A. The organization is:

A registered not-for-profit

Registered name:

Saskatchewan or federal incorporation number:

OR

A registered charity

Name:

Saskatchewan or federal incorporation number:

B. The organization

Is the legal owner of the property.
(Attach proof of ownership)

OR

Leases the property.
(Attach copy of lease agreement)

C. The primary objective of the organization is¹:

Social welfare

Civic improvement

Recreation

D. The organization has been actively operating within Saskatchewan, without interruption, for _____ year(s).

Copy of the most recent annual financial statement attached.

¹ Organizations that exist for profit, political purposes, sectarian purposes, or for the purpose of providing funding to other groups will not be considered.

2. Describe who benefits from the organization's work

Identify the demographics of the beneficiaries (*select all that apply*)

Families	Individuals	First Nations
Métis	Newcomer to Canada	Students
Seniors (55 +)	Community volunteers	Other:
Other:	Other:	

Where are the beneficiaries located (service area) (*select all that apply*)

School(s)	Neighbourhood(s)	Within municipality
Region	Municipality and surrounding Area	Province
Out of province	Other:	

Identify any of the following characteristics that may apply to the beneficiaries (*select all that apply*)

Living in poverty	Single parents
Unemployed/underemployed	Social/justice system involved
Vulnerable/at-risk	Homeless/sub-standard housing
Isolated socially/geographically	Physical disabilities
Cognitive/intellectual disabilities	Mental illness
Chronic health condition	Physical activity/sports team
Other:	Other:

Services provided (*select all that apply*)

Learning/training	Connecting clients to services
Support group	Health care (mental or physical)
Transportation	Social support services
Affordable housing	Immigration services
Recreation facility/program	Museum
Arts and culture	Other:
Other:	

3. Briefly describe the objectives and services of the organization. Include rationale for waiving the education property tax²

4. Briefly describe what the property is used for (i.e. headquarters, delivering services, etc.)

Applicant Declaration

I confirm that to the best of my knowledge the statements in this application are complete and accurate.

I confirm that all required documentation is attached.

I have printed/downloaded a copy of the completed application.

I have attached a certified copy of the resolution or bylaw for waiving the municipal tax for this property.

Name of municipal representative *(please print)* **Position**

Signature

Date

² Organizations that exist for profit, political purposes, sectarian purposes, or for the purpose of providing funding to other groups will not be considered.