



Township of Wellington North

7490 Sideroad 7 W • Kenilworth, ON N0G 2E0

Phone: 519.848.3620 Fax: 519.848.3228

www.wellington-north.com

Section 357 358 359 Application

To the Council or the Assessment Review Board

Application/Appeal #

Taxation Year

Municipality	Township of Wellington North	Roll Number	23 – 49 -
Property Address		Applicant Name	
Owner Name		Contact Number	
Mailing Address		Alt. Number	

Reason For Application (Check one box only)

- ☐ Ceased to be liable for tax at rate it was taxed – 357(1)(a)
- ☐ Became exempt – 357(1)(c)
- ☐ Razed by fire, demolition or otherwise – 357(1)(i)
- ☐ Damaged and substantially unusable – 357(1)(d)(ii)
- ☐ Sickness or extreme poverty – 357(1)(d.1)
- ☐ Mobile unit removed – 357(1)(e)
- ☐ Gross or manifest error – 357(1)(f)
- ☐ Repairs/ renovations preventing normal use (min 3 months) – 357(1)(g)

Details of reason:

Effective from: / / to / / Applicant Signature: Date: / / (mm/dd/yy) (mm/dd/yy) (mm/dd/yy)

Assessment Report

Municipality				Assessor				
Assessment Roll As Returned		Revised Since Roll Return Enter Revisions Below		Assignment Report		School Bd: <input type="checkbox"/> Eng <input type="checkbox"/> Fr <input type="checkbox"/> Other		
				<input type="checkbox"/> No Change in Assessment		<input type="checkbox"/> S357 Required For Next Year		
RTC/RTQ	2016 Base year CVA	2020 Base year CVA	Current Phased Assessment	Revised RTC/RTQ	Revised 2016 Base year CVA	Revised 2020 Base Year CVA	Revised Current Phased Assessment	Change to Current Phased Assessment
Revised:				Reason for Change (assessor comments):				
Assessor Name:				Signature:		Date: / / (mm/dd/yy)		

Treasurer's Report on Tax Liability

RTC/RTQ	Taxable Assessment Reduction	Tax Rate	Days/Months		Tax Adjustment		Original Levy	
Recommended: No Adjustment <input type="checkbox"/> Adjustment <input type="checkbox"/> Cancellation <input type="checkbox"/> Refund <input type="checkbox"/> Total Amount:								
Comments:								
Treasury Position: Signature: Date: / /								

Council Or Assessment Review Board Decision

☐ Approved ☐ Amended & Approved ☐ Not approved ☐ Cancellation ☐ Applicant did not appear ☐ Application abandoned

Appeared for Applicant: Appeared for Municipality:

Signature of Council/ARB Member: Name/Title: