

**ASSESSMENT ACT**

IN THE MATTER OF Section 45.3.1(6) of Ontario Regulation 282/98, as amended;

AND IN THE MATTER OF a declaration filed with respect to assessments for taxation in 2017 and subsequent years.

**STATUTORY DECLARATION**

I, \_\_\_\_\_

[Name]

Owner       Authorized Agent       Counsel / Paralegal

\_\_\_\_\_  
[Title, if applicable]

Of: \_\_\_\_\_

[Corporation / business style, if applicable]

\_\_\_\_\_  
[Address]

\_\_\_\_\_  
[Address]

\_\_\_\_\_  
[Province]

\_\_\_\_\_  
[Postal Code]

\_\_\_\_\_  
[Telephone]

**Do Solemnly Declare That:**

- 1. During the 2017 tax year and subsequent years the condominium unit(s) listed on the attached Schedule A will be a hotel unit as defined in section 45.3.1 of Ontario Regulation 282/98 as amended. (Please complete the schedule, including the property roll number, condominium plan, level and unit number, municipal address, and owner's name; please initial each page.)

**And/Or**

- 2. During the 2017 tax year and subsequent years the condominium unit(s) listed on the attached Schedule B will cease to be a hotel unit as defined in section 45.3.1 of Ontario Regulation 282/98 as amended. (Please complete the schedule, including the property roll number, condominium plan, level and unit number, municipal address, and owner's name; please initial each page.)

Declared before me at \_\_\_\_\_ [Municipality]

In the Province of \_\_\_\_\_

The \_\_\_\_\_ day of \_\_\_\_\_, two thousand and \_\_\_\_\_

\_\_\_\_\_  
[Signature of Declarant]

\_\_\_\_\_  
[Commissioner for Oaths]

*(Statutory Declarations MUST be completed and received by 12:00 midnight on or before June 30, 2016 to be accepted. Subsection 13(2) of the Assessment Act provides a penalty for making a false or misleading statement in this affidavit.)*

To: Municipal Property Assessment Corporation, "Condominium Hotel", P.O. Box 67236 STN BRM B, Toronto, Ontario M7Y 4N1 Fax: 1-866-297-6703



