

SCHEDULE 'B' – REFUND REQUEST FORM

A. PROPERTY INFORMATION

Folio:	Civic address:
Ownership Dates:	
From:	To:

B. OWNERSHIP INFORMATION *(as registered on title at time of ownership)*

OWNERS NAME <i>(as registered on title at time of ownership)</i>	ADDRESS FOR REFUND

C. NAME CHANGE *(provide documentation)*

Name on title:	Name change:
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D. DEATH OF FORMER OWNER *(provide death certificate)*

Refund payable to Estate of: <i>Owners name as registered on title</i>
Refund payable to "OTHER" <i>Documentation required</i>

E. RECEIPT OF REFUND *(select one option)*

Option 1: One cheque to include 100 % of refund payable all owners on title	<input type="checkbox"/>
Option 2: Individual cheques with proportional refund payable to each owner	<input type="checkbox"/>

F. SUBMITTED BY *(one owner may request refund on behalf of all owners)*

Name:	
Signature:	Date:
Email:	Phone: