



**Ministry of Revenue**  
 PO Box 58  
 Thunder Bay ON P7C 0A5  
 1 866 400-2122  
 1 888 321-6774 TTY

# Application for Refund

*Under section 8 of the Provincial Land Tax Act, 2006*

<i>Internal Use Only - Request No. / Date Received</i>		
	Day	Month
		Year

To apply for your **Refund**, please submit this completed application to the ministry:

**By Mail**  
 Ministry of Revenue  
 Provincial Land Tax  
 Box 58  
 Thunder Bay ON P7C 0A5

**In Person**  
 Provincial Land Tax Office  
 500 Donald Street East  
 Thunder Bay, Ontario

*Please Print.*

Name of Owner	Roll Number		
Mailing Address - Number and Street	City, Town, Municipality	Province	Postal Code
Legal Description	Telephone Number		

Reason for Request	Amount of Refund Requested
	\$ _____

Signature of Owner \_\_\_\_\_

Date \_\_\_\_\_

The personal information on this form is collected under the authority of the *Provincial Land Tax Act, 2006 S.O. 2006, Chapter 33 Schedule Z.2* and will be used to determine eligibility for a refund, adjustment, deferral, rebate, relief or reduction of taxes under the *Act*. Questions about the collection should be directed to: Manager, Land Taxes, Audit, Inspection and Resource Taxes Branch, 33 King Street West, PO Box 625, Oshawa ON L1H 8H9, 1 866 ONT-TAXS (1 866 668-8297), extension 18114.

### To be completed by the Provincial Land Tax Office

Refund amount Verified to Owner's Account (*attach detail of account*)

Prepared By: \_\_\_\_\_  
 Signature Date

Approved By: \_\_\_\_\_  
 Signature Date

**Ministry Use Only**

Refund Approved     Refund Disallowed

Ministry Authorization By: \_\_\_\_\_  
 Signature Date

Cheque Form Completed By: \_\_\_\_\_  
 Signature Date

Issued Payment  
 Recorded in Account By: \_\_\_\_\_  
 Signature Date

File Adjustment: Tax \$ \_\_\_\_\_ Interest/Penalty \$ \_\_\_\_\_

Journal Entry Approved By: \_\_\_\_\_  
 Signature Date