TOWN OF POUCH COVE
660 Main Road
PO Box 59
Pouch Cove, NL
A0A 3L0

(709) 335-2848 (ph)
(709) 335-2840 (fa)
info@pouchcove.ca
www.pouchcove.ca

TAX INFORMATION REQUEST FORM (THIS IS NOT A TAX CERTIFICATE)

LAW FIRM INFORMATION

NAME OF LAW FIRM: _____

CONTACT PERSON: _____

EMAIL: _____

PHONE: _____ FAX: _____

PROPERTY INFORMATION

CIVIC ADDRESS: _____

OWNER'S NAME: _____

PURPOSE OF TAX INFORMATION REQUEST: ☐ PURCHASE ☐ SALE ☐ FINANCE

SALE INFORMATION

When requesting a tax certificate in the event of a sale, please include a copy of the DEED OF CONVEYANCE, SURVEY OF PROPERTY AND PURCHASER'S CONTACT INFORMATION. Please do not send copies of warranties or affidavits.

DATE OF SALE/TRANSFER: _____

PURCHASER'S NAME: _____

PURCHASER'S PHONE: _____

PURCHASER'S EMAIL: _____

IS THIS PROPERTY TO BE SUBDIVIDED? ☐ YES ☐ NO

IF YES, PLEASE COMPLETE SUBDIVISION APPLICATION

VENDOR WAIVER

RELEASE OF PRIVATE INFORMATION *MUST BE COMPLETED*

As the registered/legal owner of the above-mentioned property, hereby give permission to release the requested tax information to the above noted law office.

NAME: _____ SIGNATURE: _____

TAX INFORMATION – PROVIDED BY THE TOWN OF POUCH COVE

CIVIC ADDRESS: _____

PARCEL ID NUMBER: _____

YEARLY TAXES: PROPERTY: _____ WATER/SEWER: _____

BUSINESS: _____ OTHER: _____

FIRE PROTECTION FEE: _____

OUTSTANDING TAXES TO DECEMBER 31, 20____, AS ASSESSED TO DATE: _____

OUTSTANDING TAXES: PROPERTY: _____ WATER/SEWER: _____

BUSINESS: _____ OTHER: _____

FIRE PROTECTION FEE: _____

INTEREST WILL BE CHARGED AT THE RATE OF 1% PER MONTH COMPOUNDED.

OUTSTANDING INFORMATION ONLY VALID FOR 30 DAYS, PLEASE RE-REQUEST AFTER THAT TIME.

THIS TAX INFORMATION REQUEST FORM STATES THE CURRENT TAX POSITION OF THE PROPERTY; HOWEVER, PLEASE BE ADVISED THAT AT ANY TIME, A PROPERTY MAY BE SUBJECT TO A SUPPLEMENTARY ASSESSMENT FOR A CURRENT OR PAST TAXATION YEAR. IN ACCORDANCE WITH SECTION 119 OF THE MUNICIPALITIES ACT, THE NEW OWNER OF REAL PROPERTY WILL BE LIABLE FOR THE PAYMENT OF THE REAL PROPERTY TAX ASSOCIATED WITH SUCH ASSESSMENT.

DATE : _____ COMPLETED BY: _____

PLEASE NOTE THE FOLLOWING FEES: TAX INFOMRATION AND TAX CERTIFICATE (IF REQUESTED): $150
COMPLIANCE LETTER: $150