

SECTION ☒ 357 / ☐ 358 / ☐ 359 APPLICATION
TO THE COUNCIL OR THE ASSESSMENT REVIEW BOARD

Application/Appeal #:

Taxation Year:

2019

Municipality: TOWN OF FORT FRANCES Roll Number: 59-12-232-001-054-00
Property Address: 707 CHURCH ST Applicant Name: KEN BEKESI
Owner Name: KEN BEKESI Contact Number: 807-276-0624
Mailing Address: Box 331 Alternative Number: _____
FORT FRANCES ON P9A 3017 Email Address: _____

Reason for s357 application: (Check one box – applicable to s357 only)

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

Details of Reason for s357, s358 or s359 application: FIRE MAR 17, 2019.

Effective from: 03/11/19 to 12/31/19
(MM/DD/YY)

Applicant Signature: [Signature]

Date: 11/12/19
(MM/DD/YY)

ASSESSMENT REPORT: MUNICIPALITY

TREASURER'S RECOMMENDATION TO COUNCIL

Assessment Roll
As Returned

Revised Since
Roll Return ☐

Enter Revisions Below

Assessment Report

School Bd: ☐ Eng ☐ Fr ☐ Other

☐ No Change in Assessment

☐ S357 Required for Next Year

RTC/RTQ

2005
Base-year
CVA

2008
Base-year
CVA

Current
Phased
Assessment

Revised
RTC/RTQ

Revised 2005
Base-year
CVA

Revised 2008
Base-year
CVA

Revised
Current Phased
Assessment

Change to
Current Phased
Assessment

RTEP

67,750

Revised:

Reason for Change:

Reason Original Assessment Revised: _____

TREASURER'S REPORT ON TAX LIABILITY

RTC/RTQ	Taxable Assessment Reduction	Tax Rate	Days / Months	Tax Adjustment	Original Levy

Recommended : ☐ No Adjustment ☐ Adjustment ☐ Cancellation ☐ Refund Total Amount _____

Comments: _____

Treasury Position: _____ Signature: _____ Date: ____/____/____

COUNCIL OR ASSESSMENT REVIEW BOARD DECISION:

Hearing Date (MM/DD/YY): ____/____/____

☐ Approved ☐ Amended & Approved ☐ Not Approved ☐ Applicant Did Not Appear ☐ Application Abandoned

Reason: _____

Appeared for Applicant: _____ Appeared for Municipality: _____

Signature of Council/ARB Member: _____ Name/Title: _____