



PROPERTY AND BUSINESS TAXES

APPLICATION FOR TAX INSTALMENT PAYMENT PLAN (TIPP)

CONTACT: 311 or toll free 1-877-311-4974 – FAX: 204-986-3220



To Enrol on TIPP for **Property Taxes** only, please complete Sections 1, 2, 5 & 6 (**PLEASE PRINT**):

1. ROLL NUMBER		LOCATION ADDRESS		POSTAL CODE
IS THIS YOUR PRIMARY RESIDENCE? YES <input type="checkbox"/> NO <input type="checkbox"/>		MAILING ADDRESS (F DIFFERENT THAN THE LOCATION ADDRESS ABOVE)		
APPLICANT(S) NAME	Surname	Given Name	BUSINESS TELEPHONE	HOME TELEPHONE
APPLICANT(S) NAME	Surname	Given Name	BUSINESS TELEPHONE	HOME TELEPHONE

2. Please indicate the month in which your payments will commence and the number of monthly instalments over which your payment will be applied within the calendar year. For Realty Taxes, instalment periods can vary between 7 and 12 months.

Starting Month _____ Number of Months _____

To Enrol on TIPP for **Business Taxes** only, please complete Sections 3, 4, 5 & 6 (**PLEASE PRINT**):

3. BUSINESS TAX ROLL NUMBER	LOCATION ADDRESS	POSTAL CODE
BUSINESS NAME	TELEPHONE	FAX NUMBER
TAXABLE PARTY (PROPRIETOR, PARTNERS OR CORPORATE NAME)		
MAILING ADDRESS (IF DIFFERENT THAN THE LOCATION ADDRESS ABOVE)		POSTAL CODE

4. Please indicate the month in which your payments will commence and the number of monthly instalments over which your payment will be applied within the calendar year. For Business Taxes, instalment periods can vary between 6 and 12 months.

Starting Month _____ Number of Months _____

5. **YOU MUST INCLUDE ONE OF THE FOLLOWING :**

<input type="checkbox"/>	Blank cheque marked « void » ; or
<input type="checkbox"/>	Preauthorized payment form provided by your financial institution

I/We the applicant(s) authorize my/our above named financial institution to electronically debit my/our account for the monthly tax instalment payment payable to The City of Winnipeg on the first day of each month as payment in part of the taxes for the above named property. The treatment of each payment shall be the same as if the undersigned had personally issued a cheque. I/We acknowledge the right of The City of Winnipeg to cancel my/our participation in the payment plan if any debits are not honoured by the participant's financial institution. Unpaid taxes as of the date of termination of participation in the plan are subject to penalties as per the penalty by-law. I/We acknowledge there may be adjustments in the amount of the monthly payment on June 1 for Business Taxes and on July 1 for Property Taxes each year as a result of The City of Winnipeg's annual tax levy. I/We agree to provide two weeks written notification if I/we change bank information, sell the property, or wish to cancel participation in the plan for any reason.

A completed application must be received by the City of Winnipeg by the 15th of the month to ensure enrolment for the following month.

PLEASE ATTACH A SAMPLE CHEQUE MARKED VOID TO THIS APPLICATION.
RETURN BOTH ITEMS TO: THE CITY OF WINNIPEG •ASSESSMENT AND TAXATION DEPARTMENT
•457 MAIN STREET •WINNIPEG •MB •R3B 1B5

CONDITIONS AS STATED ON THE CITY OF WINNIPEG INTERNET PAGE:
<http://www.winnipegassessment.com/AsmtTax/English/Payments/Tipp.stm>

AUTHORIZED SIGNATORS OF THE ABOVE ACCOUNT **MUST SIGN** THIS APPLICATION

6. APPLICANT'S SIGNATURE	DATE	YYYY	MM	DD
SECOND SIGNATURE (IF REQUIRED)				