

CITY OF BRANDON HOME RENOVATION TAX ASSISTANCE PROGRAM Applicant Declaration

Applicant Information					
Eligible Homeowner Full Name					
Address of property					
Mailing address if different from property address	City	BRANDON	Province	MB	Postal Code

Income Declaration

Please provide the total gross annual income for yourself, as well as all other household members if applicable. The gross annual income should be calculated by adding all sources of income that you or other household members receive such as gross salary, wages, commissions and seasonal earnings, child tax benefits, employment insurance benefits, social assistance, mother's allowance, welfare, workers compensation, pensions, supplements, allowances, annuities, bank interest, investment and dividend income, alimony and child support payments, income from self employment and other income such as net room and board from boarders or income derived from fostering.

	Gross annual income
Applicant	\$
Household member 1	\$
Household member 2	\$
Household member 3	\$
Household member 4	\$
Total Gross household income	\$

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I hereby certify that all the information contained on this form, including income is true and complete in every aspect.

Applicant Signature	Date

☐ Please attach a copy of your most current Revenue Canada tax assessment, to verify your family income.