



# PROPERTY TAX REFUND REQUEST

**Return this form by:**

**Mail:** City of Saskatoon, Box 1788, Saskatoon, SK S7K 8E2  
**Fax:** (306) 975-7975 **Email:** revenue@saskatoon.ca  
**In Person:** Customer Service, Corporate Revenue, City Hall, 222 3rd Ave N

**PROPERTY ADDRESS:** \_\_\_\_\_

**ROLL NUMBER:** \_\_\_\_\_

**REFUND AMOUNT REQUESTED:** \_\_\_\_\_

**REASON FOR REQUEST:** \_\_\_\_\_

**POSSESSION DATE (if sale occurred):** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**REQUEST MADE BY (PRINT):** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**DAYTIME PHONE NUMBER:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**REFUND CHEQUE MADE TO NAME(S):** \_\_\_\_\_

**MAILING ADDRESS FOR REFUND CHEQUE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Office Use Only:

**Refund to:**

- Prior Owner
- Current Owner
- Lawyer
- Mortgage Co.
- Other: \_\_\_\_\_

**Reference on cheque:**

- Mortgage: \_\_\_\_\_
- File No: \_\_\_\_\_
- Other: \_\_\_\_\_

**If Duplicate Payment, approval obtained from:**

- Owner
- Mortgage Co.
- Lawyer
- CIS TRANSACTION ENTERED

**Notes:** \_\_\_\_\_

\_\_\_\_\_