



REPUBLIC OF TRINIDAD AND TOBAGO

Signature of Taxpayer

THE PROPERTY TAX ACT, CHAP. 76:04 APPLICATION FORM FOR DEFERRAL OF ASSESSED TAX

(Section 23)

NAME	: PROPERTY PIN #		
ADDR	ESS: LETTER ID		
	ACCOUNT ID		
PHON	E # PERIOD ENDING		
EMAII	ADDRESS		
DATE			
DITTL			
	y request a Deferral of the payment of the assessed Tax as shown on the Notice of Assessment dated ound/s of my request is/are as follows:		
0	Based on my impoverished condition and my inability to improve my financial position significantly by reason of		
0			
0	o impaired health.		
0	Other special circumstances, that would create undue hardship, namely (please explain):		
Please	find attached/enclosed the following document/s as evidence that I am in receipt of:		
0	A public assistance grant afforded under the Public Assistance Act Chap 32:03;		
0	A disability grant afforded under the Public Assistance Act Chap 32:03;		
0	A senior citizen's pension;		
0	A Trinidad and Tobago conditional cash transfer card from the State; or		
0	An annual income not exceeding the maximum amount specified in section 3 of the Senior Citizen's Pension Act		
submi mater	Pursuant to section 28 of the Property Tax Act Chap 76:04, all applicants shall note that the ssion of any written or oral statement which they know or have reason to believe to be false in any ial particular, commits an offence and is liable on summary conviction to a fine of five thousand 0.00) dollars.		

FOR OFFICIAL USE			
Date Received:	Date Expired:		
Comments:	Case ID:		
o Follow up letter	Authorized:		
Contact Taxpayer:	Date:		
o To call	Acknowledgement Date:		
o To come in			
o Refusal	Official Stamp:		