

Tax Year
(as shown on your assessment notice)

Assessed Person Information

Assessed Person(s) (as shown on your assessment notice)

Municipal and Property Information

Municipality Name (as shown on your assessment notice)	Assessment Roll Number
--	------------------------

Contact Information (if different than as shown on the assessment notice)

Contact Name	Mailing Address		
City/Town	Province	Postal Code	
Telephone Number (include area code)	Fax Number (include area code)	Email Address	

Section of the Municipal Government Act information requested under: *(check one only)* 299 300

Date Information Requested *(mm/dd/yyyy)* _____

Information Requested *(provide as much detail as possible)*:

Amount of Requested Information Received: All Some None

If Amount of Requested Information Received was SOME, Indicate the Requested Information NOT Received:

Date Information Received *(mm/dd/yyyy)* _____ *(If Amount of Requested Information Received was NONE, enter "N/A")*

PLEASE PROVIDE A COPY OF:

- The Assessment Notice
- If not CONTAINED ON the Assessment Notice, any information ATTACHED TO the Assessment Notice specifying procedures and timelines to be followed to request information under Section 299 or Section 300 of the Municipal Government Act
- Any documentation provided to the municipality in order to receive information under Section 299 or Section 300 of the Municipal Government Act
- If Contact Name is different than Assessed Person, documentation indicating authority to represent the Assessed Person under Section 299 or 300 of the Municipal Government Act
- If Amount of Requested Information Received was SOME, copies of Information Received

Assessment Services Branch
15th Floor, Commerce Place
10155 - 102 Street
Edmonton, Alberta, Canada T5J 4L4

 Signature of the Assessed Person Printed Name of Signatory Person and Title Date *(mm/dd/yyyy)*