Applicant Information	
Date (yyyy-mm-dd):	
Applicant Name *	Phone Number *
Mailing Address	Postal Code
Email Address	
Property Information	
	FIPP, or are you applying to cancel your TIPP payments? perty and cancelling others, fill out separate forms for
Registering	
Cancelling	
Please note that if you are cancelling you be charged for that payment. For more i	ur TIPP Payments within ten days of your next payment, you will still information, see Bylaw 340-2018.
Tax Roll Number	Address/Legal Description
Tax Roll Number	Address/Legal Description

Tax Roll Number	Address/Legal Description
Include the Tax Roll Numbers and correspondi	ng addresses of any other properties you own
Notice of Collection	
Section 33 (c) of the Alberta Freedom of Information under Part 2 of that Act. It will be used for the purpose	uested on this form is collected under the authority of n and Protection of Privacy Act and will be protected se of assessing eligibility for Saddle Hills County's Tax ny questions about this collection to: FOIP Coordinator, nada, T0H 3G0, 1-888-864-3760.
Please send me a pdf copy of this form	Email address for copy of form *
○ Yes	
○ No	

Payment Information

To be completed by Saddle Hills County Staff

Annual Tax Levy Year	
Occasio di a Tan Dallini, adiana Assa al Ta	
Specify the Tax Roll Number, Annual Ta 12) for each property applied for in the a	x Levy Amount, and Payment Amount (Levy divided by above form.
Application reviewed by	Application status
	Approved
	Denied
Memo	Does payment begin on January 1st of a calendar year? *
	○ No
Payment Start Date	If payment does not begin on January 1st of the year, how many months will pass in the calendar year before payment begins?
Initial Payment Required	Agreement Completed with the applicant on

Signed TIPP Agreement provided to applicant:
In Person
By Mail
By Email

Thank You

Your form has been successfully submitted. A member of our Staff will be in touch with you once it has been processed.