



KENT (DISTRICT)

PO BOX 70
AGASSIZ, BC V0M 1A0
www.district.kent.bc.ca

2015 PROPERTY TAX NOTICE

DUE DATE: Wednesday, July 15, 2015



POSTMARKS NOT ACCEPTED AS DATE OF PAYMENT

1% PENALTY WILL BE ADDED TO CURRENT TAXES UNPAID AFTER JULY 15, 2015
AND A FURTHER 9% WILL BE ADDED TO CURRENT TAXES UNPAID
AFTER JULY 31, 2015.

SMITH, JOHN
DOE, JANE
1111 MAIN ST.
AGASSIZ, BC V0M 1A1

LEGAL DESCRIPTION			
LOT: 0; PLAN NUMBER: XXX000; DISTRICT LOT: 00; LAND DISTRICT: 00; MANUAL CLASS CODE: 0000;			
TOTAL NET ASSESSED VALUES FOR TAXATION PURPOSES			
CLASS	GENERAL	SCHOOL	HOSPITAL
01	243,200	243,200	243,200
COLUMN A NO GRANT	COLUMN B BASIC GRANT	COLUMN C ADDITIONAL GRANT	

FOLIO #	310 11111111	ACCESS CODE	45089
PROPERTY ADDRESS	1111 MAIN ST.		
PID	000-000-000		
Mortgage			

SCHOOL TAX COLLECTED ON BEHALF OF THE PROVINCE OF BC

School Taxes Collected for the Province of BC
Less: HOME OWNER GRANT

695.43	695.43	695.43
	0.00	-275.00
695.43	695.43	420.43

TAXES COLLECTED FOR OTHER AGENCIES

BC Assessment
Hospital
Municipal Finance Authority
Regional District

14.49	14.49	14.49
54.34	54.34	54.34
0.05	0.05	0.05
30.68	30.68	30.68
99.56	99.56	99.56

POLICE SERVICES

Police

178.67	178.67	178.67
178.67	178.67	178.67

DISTRICT OF KENT TAXES

General Municipal
Dyking

794.79	794.79	794.79
17.27	17.27	17.27
812.06	812.06	812.06

2015 TOTAL TAXES

1,785.72	1,785.72	1,510.72
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Prepayments/Credits
Adjustments

-8.28	-8.28	-8.28
-1,785.72	-1,785.72	-1,785.72

2015 BALANCE

-8.28	-8.28	-283.28
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If eligible, complete the Home Owner Grant application below.

The Pre-Authorized Payment Plan amount for 2016 will be

A	\$198.41	B	\$198.41	C	\$167.86
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Customer Copy

AMOUNT DUE JULY 15, 2015

A - NO GRANT	B - BASIC GRANT	C - ADD'L GRANT
-\$8.28	-\$8.28	-\$283.28

Detach this part and submit with your payment by July 15, 2015 to:
KENT (DISTRICT)
PO BOX 70 AGASSIZ, BC V0M 1A0

2015 PROPERTY TAX NOTICE
See Reverse Side For Important Information



HOME OWNER GRANT APPLICATION

I, _____
PRINT NAME IN FULL

_____ ADDRESS OF RESIDENCE

have read and understand the Home Owner Grant eligibility requirements on the reverse and certify that I qualify for:

TELEPHONE _____

DATE: _____

BASIC GRANT, OR

I understand that the collector, and/or the Branch may require

A NO Grant	B Grant:0.00	C Grant:275.00
-\$8.28	-\$8.28	-\$283.28
AMOUNT PAID: _____		