

APPLICATION FOR FN GRANT/ (print name in full)

Folio# _____

Year 202 ____

I, _____ certify that I am the lessee/occupier for the current year on this notice, that the parcel is (are) occupied by me as my principal residence. Neither my spouse nor I have applied or will apply for or receive a Home Owner Grant on any other residence in the Province of BC during this calendar year, and to the best of my knowledge, no other person has received a Grant.

| | | | |
|--|-----------|---------------------|-----------|
| Address of Residence | Phone No. | Date of Application | Sign Here |
| FN OVER 65 OR HANDICAPPED GRANT | | Email: | |

I am eligible for the FN Over 65 or Handicapped Grant for the reason, which follows:

❖ I am or will be 65 or over during this calendar year

OR

❖ I have provided the Band's Collector with the required medical certificate that:

- I am a handicapped person, or
- A handicapped spouse or relative resides with me

❖ I am in receipt of or I am the spouse or widow/widower of a recipient of:

- An allowance under the War Veterans Allowance Act (Canada) or,
- An allowance under the Civilian War Pensions and Allowance Act (Canada)

I was born on

Year / Month / Day