Policy Manual



6211 – Benefits Program

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6211 **Benefits Program** July 1, 2023 Approved

PURPOSE 1.

This policy establishes and outlines guidelines and procedures for low income or 1.1 disabled Woodlands County property owners to access benefits for property tax rebates, snow flags, and transportation funding.

DEFINITIONS 2.

- 2.1 Alberta Provincial Property Tax Deferral Program means the tax deferral program that allows participants to defer all or part of residential property taxes through a low-interest home equity loan with the Government of Alberta.
- 2.2 Developmentally Disabled Person means a person who experiences difficulties in certain areas, especially in "language, mobility, learning, self-help, and independent living" and can obtain a letter from their psychologist and/or physician stating they have a significant limitation in intellectual capacity or in adaptive skills.
- 2.3 Good Standing means that municipal property taxes are current and there are no arrears.
- 2.4 Homeowner means any client whose name is on the title and who resides in the home.
- 2.5 Low Income means net income below the eligible amount per section 3.4 of this Policy. based on an individual's Canada Revenue Agency Tax Assessment for the current year.
- 2.6 Notice of Assessment means formal documentation from Canada Revenue Agency showing processed tax return, used in accordance with FOIP s. 17.
- 2.7 Physically Disabled Person means a person who can either produce their parking placard or obtain a letter from their physician stating they are permanently physically disabled.
- 2.8 Proof of Income is based on Line 150 of the current year's income tax Notice of Assessment from Canada Revenue Agency.
- 2.9 Senior means anyone 65 years of age or older.

3. POLICY DETAILS

3.1 **Property Tax Rebate**

Low Income, Senior or Disabled Woodlands County homeowners who qualify could receive a \$150.00 flat rate tax rebate. Applicants must:

- Be a registered homeowner on the Alberta Land Title; a.
- b. Meet the eligibility requirements per section 3.4 of this Policy;

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- c. Reside in the home;
- d. Provide a letter from their healthcare professional if physically or developmentally disabled;
- e. Have their municipal taxes in good standing;
- f. Not be enrolled in the Alberta Provincial Property Tax Deferral Program; and
- g. Applications will be received between July 1 and December 31 of the current tax year.

3.2 Transportation Funding for Health-Related Appointments

Low Income, Senior or Disabled Woodlands County residents who qualify can be reimbursed transportation costs to attend health related appointments.

- a. The County will reimburse healthcare-related transportation expenses at the rate of \$0.50 per kilometer to a maximum of \$300.00 per person, per year. Funds for those applicants under the age of 18 will be released to the parent or guardian.
- b. Applicants must meet the eligibility requirements per section 3.4 of this Policy;
- c. Healthcare related appointments include (but are not limited to: general physician, specialist, surgeon, dental, vision, paramedical, counselling lab testing). Healthcare appointments do not include pharmacy.
- d. The County will reimburse transportation expenses related to attending the Healthy Living Program in Whitecourt (registered through the Whitecourt Healthcare Centre) at the rate of \$0.50 per kilometer to a maximum of \$300.00 per year. Proof of registration and attendance is required.
- e. There are two intakes per year for transportation grant applications. January 1-June 30 and July 1-December 31. Deadline to submit applications is one week following the end dates.
- f. Applications are processed for reimbursement by Woodlands County twice per year after the semi-annual intake ending period, and not on an individual basis.

3.3 Free Snow Flags

Low Income, Senior or Disabled Woodlands County residents who qualify can receive up to three (3) free snow flags per year.

- a. Eligible to individuals with a physical or developmental disability. A letter from the related healthcare professional confirming the need for support must accompany the application.
- b. Applicant must complete a Snow plow Waiver in accordance with Woodlands County's current snowplowing policy on an annual basis.
- c. Successful applicants will be provided up to three (3) flags per year and must not be in possession of more than three (3) flags at one time.



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3.4 Eligibility

Low Income: Applicants must provide a copy of their Tax Notice of Assessment a. from Canada Revenue Agency for the current year and be under the following net income amounts based on the Alberta FCSS (Family and Community Support Services) Low Income Volunteer Tax Program:

| 1 person | \$ 30,000 |
|---------------------|--------------|
| 2 persons | \$ 40,000 |
| 3 persons | \$ 42,500 |
| per dependant after | \$ 2,500 |

- b. Senior: Individuals 65 years or older. Proof of age must be provided. (driver's license, birth certificate)
- c. Physically or Developmentally Disabled Person: Must provide a letter from their physician or psychologist stating they are permanently physically or developmentally disabled.

PROCEDURE 4.

Applications for the Tax Rebate Program, Transportation Funding and Free Snow Flag Program can be obtained at woodlands.ab.ca or the Woodlands County municipal offices.

Appendix A - Tax Rebate Program

Appendix B - Transportation Funding Program

Appendix C - Free Snow Flag Program

Completed applications can be submitted via email, post or dropped-off at the Woodlands County municipal offices. Attention: Community Services Coordinator. email: communityservices@woodlands.ab.ca

5. RELATED POLICIES AND DOCUMENTS

5.1 Policy 3232 – Private Driveway Plowing & Grading (December 7 2022)

6211 – Benefits Program Appendix A – Municipal Property Tax Rebate Application Form

| CONTACT INFORMATION | |
|---------------------|-------|
| Applicant Name | |
| | |
| Mailing Address | |
| | |
| Roll Number | |
| | |
| Daytime Phone | Email |
| | |

Select "Yes" in ONE of the categories below to qualify for the program.

| Are you 65 years old or older? If "Yes", please provide a copy of a piece of ID that confirms your age. | | |
|--|--|--|
| Are you low income? If "Yes", please provide a copy of your Notice of Assessment or Proof of Assessment issued to you by | | |
| Revenue Canada (in accordance with FOIP Section 17). | | |
| | | |
| Do you have a disability? If "Yes", please provide a doctor's note or proof of disability. □ Yes □ No | | |

Applicant's Signature

Tax Clerk's Signature

| FOR OFFICE USE ONLY | |
|------------------------------|----------------|
| Verified Residence | Received Stamp |
| | |
| Current Taxes Paid | |
| □ Yes □ No | |
| Copies of Documents Attached | |
| □ Yes □ No | |

6211 – Benefits Program Appendix B – Transportation Grant Application Form

| CONTACT INFORMATION | |
|-------------------------------|-------|
| Applicant Name | |
| | |
| Mailing Address | |
| | |
| Legal Land Location/Blue Sign | |
| | |
| Daytime Phone | Email |
| | |

Select "Yes" in ONE of the categories below to qualify for the program.

| Are you 65 years old or older? If "Yes", please provide a copy of a piece of ID that confirms your age. | | |
|---|--|--|
| | | |
| Are you low income? If "Yes", please provide a copy of your Notice of Assessment or Proof of Assessment issued to you by Revenue Canada (in accordance with FOIP Section 17). | | |
| \square Yes \square No | | |
| | | |
| Do you have a disability? If "Yes", please provide a doctor's note or proof of disability. | | |
| | | |
| | | |

IMPORTANT: Please complete **ALL** fields in full and ensure to collect the clinic stamp from the receptionist at the time of your appointment **see reverse side for details.** Alternately, the clinic may be able to print a confirmation of the appointment for you.

NOTE: Please ensure that spouses are not claiming for the same trip.

Applicant's Signature

Date

| FOR OFFICE USE ONLY | |
|------------------------------|----------------|
| Copies of Documents Attached | Received Stamp |
| | |
| | |

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6211 – Benefits Program Appendix B – Transportation Grant Application Form

| on of Appointment City | Stamp from Clinic or Printed Copy of Appointment |
|---------------------------|---|
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6211 – Benefits Program Appendix C – Free Snow Plow Flag Application Form

| CONTACT INFORMATION | |
|-------------------------------|-------|
| Applicant Name | |
| | |
| Mailing Address | |
| | |
| Legal Land Location/Blue Sign | |
| | |
| Daytime Phone | Email |
| | |

Select "Yes" in ONE of the categories below to qualify for the program.

| Are you 65 years old or older? If "Yes", please provide a copy of a piece of ID that confirms your age. | | |
|--|--|--|
| | | |
| | | |
| Are you low income? If "Yes", please provide a copy of your Notice of Assessment or Proof of Assessment issued to you by | | |
| Revenue Canada (in accordance with FOIP Section 17). | | |
| | | |
| | | |
| Do you have a disability? If "Yes", please provide a doctor's note or proof of disability. | | |
| | | |
| | | |

Applicant's must fill out a snow plow flag application and waiver in accordance with Policy 3232 Private Driveway Plowing & Grading (December 7, 2022).

Applicant's Signature

Date

| FOR OFFICE USE ONLY | |
|------------------------------|----------------|
| Copies of Documents Attached | Received Stamp |
| | |
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