



Tax Clearance Certificate
Municipal By-Election

Declaration

SECTION 1

This is to certify that _____, a resident of St. John's, and residing at _____, is not in arrears of any taxes or other assessments due to the City as of _____.

DATED at St. John's, Newfoundland, this _____ day of _____, 2020

Name _____ Title _____

Privacy Notice

SECTION 2

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for the purpose certifying a Candidate. Questions about the collection and use of the information may be directed to the Elections Coordinator, election@stjohns.ca.

Please send completed form to:

Elections Coordinator
P.O. Box 908, 10 New Gower Street
St. John's, NL A1C 5M2

For further information:
Phone: 709-576-8619
Email: election@stjohns.ca