



Department of
Finance
Taxation and
Property Records

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Department of Finance
Taxation and Property Records
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Request for Residential Unit Development Incentive (RUDI) Rebate

(Pursuant to the Prince Edward Island Real Property Tax Act R.S.P.E.I. 1988)

Freedom of Information and Protection of Privacy

Personal information on this form is collected under the authority of Section 31(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purposes of tax administration and enforcement. Questions on the collection and use of this information can be directed to the Manager, Corporate and Tax Administration Services, PO Box 2000, Charlottetown, PE C1A 7N8 (902) 368-5137.

NOTE: Refunds are issued by the Province of Prince Edward Island through Electronic Funds Transfer (EFT). If you are not registered with the Province of PEI to receive EFT payments, please complete and return the attached Payee Registration Form with your refund request.

Section A - Claimant Information (please print)					
Full Name (must include middle name):				Parcel No.:	
Mailing Address:					
City/Town/Village:				Province:	Postal Code:
Telephone Number:	Fax Number:	E-mail:			
Section B - Incentive Information					
1. Has there been a change in ownership or a change in use of property in the year?				Yes	No
2. Total amount of incentive claim:				\$	
3. Taxation year in which claim is being made for:					
4. Has your property tax been paid in full for the year being claimed?:				Yes	No
5. Program year:	Year 1 (100%)	Year 2 (80%)	Year 3 (60%)	Year 4 (40%)	Year 5 (20%)
6. Do you wish to:	Apply for refund	Roll to next tax year	Transfer to property #		
7. This property continues to meet the eligibility requirements of the RUDI program:				Yes	No
If yes, please include documents to support continued eligibility (i.e. Rent Roll, Lease Agreements, etc.)					
Section C - Certification					
I hereby certify that the above information is correct to the best of my knowledge and belief.					
Name of Contact Person (please print)			Signature		
Title			Date		

For Office Use Only	Section	Object	Program	Project	Amount
Account No.:					
Description to appear on payment:					
Received Date:	Approver(s):				