

This form will need to be completed and submitted along with your **Declaration of Occupancy Status** annually. Please read and complete all sections including signatures.

Check to confirm that you are claiming the medical exemption and meet the criteria. A medical practitioner must complete Part 3 of this form.

Secondary residence is periodically occupied by an owner (or their spouse or dependent) for the purpose of medical treatment and is close to medical treatment facility:

- (a) that, in the opinion of a medical practitioner, treatment is required for the health of the individual; and
 (b) that it is impractical for the individual to obtain treatment in reasonably close proximity to the individual's principal residence (outside the GTA).

Part 1 - Property and Owner Information

Assessment Roll Number (21 digits)										
1	9	-		-		-		-		-
Property Address (Street Number, Street Name, Suite/Unit Number)										
Property Owner Name (First, Last or *Single)										
Telephone Number										
Property Owner Certification - I certify that all information provided in Part 1 of this form is true and correct to the best of my knowledge. I understand all information is subject to audit and verification. I agree not to submit any personal information relating to any other individual without obtaining the individual(s) prior consent to submit such personal information to the City and ensuring that the individual has seen and understood the Notice of Collection outlined at the bottom of page 2 of this form.										
Property Owner Signature								Date (yyyy-mm-dd)		

Part 2 - Patient Information

Name of Patient (First, Last or *Single)	Patient's Relationship to Property Owner (if owner, enter owner)
Patient Certification – I certify that all information provided in Part 2 of this form is true and correct to the best of my knowledge, and I authorized the property owner to submit this completed form to the City of Toronto for the purposes of administering the Vacant Home Tax. An adult guardian must sign on behalf of a child under the age of 18.	
Signature of Patient	Date (yyyy-mm-dd)

Part 3 - Medical Practitioner's Certification (to be completed by medical practitioner only)

Name of Medical Practitioner (First, Last or *Single)	
Certification/Fellowship	Telephone Number
Name of Medical Facility (where treatment is occurring)	
I certify that in my professional opinion, the patient noted in Part 2 of this form is participating in a course of treatment that is required for the health of the individual.	
Signature of Medical Practitioner	Date (yyyy-mm-dd)

*If first name and last name do not apply because you have either a registered birth certificate or change of name certificate bearing a single name you may use single name.

Form
**Vacant Home Tax
Medical Treatment Certificate**

Submit Your Completed Form

This form will need to be completed and submitted along with your Declaration of Occupancy Status **annually**.

Online: toronto.ca/VacantHomeTax

Mail: City of Toronto, Revenue Services, Vacant Home Tax, 5100 Yonge St., Toronto, ON M2N 5V7

In Person: At City Hall and Civic Centres Inquiry and Payment Counters, for location information visit toronto.ca/InquiryPaymentCounters.

Inquiries: Contact 311 - to speak to a customer service representative.
Call 311 within Toronto, outside Toronto call 416-392-CITY(2489)
TRS: Call 711 (416-338-0889) Telecommunications Relay Service

Revenue Services collects personal information on this form under the legal authority of the City of Toronto Act, 2006, section 8 and Part XII.1, and the City of Toronto Municipal Code, Chapter 778, Taxation, Vacant Home Tax, Article 3, Tax, Article 4, Declaration and Deemed Vacancy, Article 5, Assessment and Collection and Article 11, Offences and Fines. The information will be used for the purposes of administering and enforcing the Vacant Home Tax, specifically for the purposes of receiving and reviewing Declarations received pursuant to § 778-4.1, assessing the applicability of the exemption to each taxable Vacant Unit pursuant to § 778-3.3(8) per By-law 1065-2024, issuing a Notice of Tax to the Owner setting out the amount of Tax assessed and the Payment Date; as well as contacting the Owner and other parties concerning the administration and enforcement of the Vacant Home Tax. Questions about this collection can be directed to Manager, Revenue Programs & Operations, Revenue Services, 5100 Yonge Street, Toronto, Ontario M2N 5V7 or by telephone 416-395-6960.