



**THE MUNICIPALITY OF THE COUNTY OF KINGS**

PO Box 100  
Kentville, NS  
B4N 3W3

**REQUEST FOR TAX CERTIFICATE**

**Requested by:** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Property Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Assessed to:** \_\_\_\_\_

**Other Details:** \_\_\_\_\_

\_\_\_\_\_

**CERTIFICATE REQUIRED**  **STATEMENT REQUIRED**

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**OFFICE USE ONLY**

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**Date received:** \_\_\_\_\_

**Date issued:** \_\_\_\_\_

**Certificate #:** \_\_\_\_\_

**Issued by:** \_\_\_\_\_