



Certification of Pool Removal

Information for the property

File n°: _____

Owner's name: _____

Address: _____

Telephone n°: _____

I hereby certify that I am the owner of the above-mentioned building and that there is no pool on the property in question.

Owner's signature: _____

Date: _____

This form must be returned duly completed, to Ville de Gatineau before July 1st of this year to receive the credit applicable for the said year. If it is returned after July 1st of this year, the changes will take effect for the billing of the following year.

By mail:
Ville de Gatineau
Service des finances
Division revenus
C. P. 1970, succ. Hull
Gatineau (Québec) J8X 3Y9

By fax:
Service des finances
Division revenus
819 243-2380

By email:
finances@gatineau.ca

In person:
Centre de services d'Aylmer
115, rue Principale
Centre de services de Buckingham
515, rue Charles
Centre de services de Gatineau
144, boul. de l'Hôpital
Centre de services de Hull
775, boul. de la Carrière
Centre de services de Masson-Angers
57, chemin de Montréal Est

Note: The City of Gatineau reserves its right to inspect the property at any time.