



TOWN OF ROCKY MOUNTAIN HOUSE

P.O. BOX 1509 5116 50 AVENUE,
ROCKY MOUNTAIN HOUSE AB T4T 1B2

REQUEST FOR INFORMATION – LAWYERS

Tax Certificates \$25

Date_____

Email to: propertytaxes@trmh.ca

Firm requesting Information_____

Email_____

Fax #_____ Telephone_____

Your File Number_____

Roll Number_____ Assessment_____

Civic Address_____

Legal Description_____

Meridian_____ Range_____ Township_____ Section_____ Part Section_____

Property Taxes _____ Year_____ Paid Yes/No

Tax Instalment Plan - Monthly payment _____ Amount owing_____

Utilities Outstanding_____

CLOSING DATE_____

New Owners_____

Comments_____

Completed by _____

Town of Rocky Mountain House

FOIP Notification: The personal information you provide on this form is being collected under the authority of the *Freedom of Information and Protection of Privacy Act* and is used solely for purposes relating to the administration of Assessment/Taxation services. Questions about the collection or use of this information can be directed to the Town of Rocky Mountain House FOIP Coordinator at 403-845-2866.