|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Application for Small Business Rates Relief | | | | | | | | | | |
| 1 | | |  | | | | | | | |
| Name of Ratepayer | | | | | | |  | | | |
| Address of Property for which relief is required | | | | | | |  | | | |
| Telephone number | | | | | | |  | | | |
| Fax number | | | | | | |  | | | |
| Email address | | | | | | |  | | | |
| Rateable Value | | | | | | |  | | | |
| Business Rates Account Number | | | | | | |  | | | |
| Property Reference Number | | | | | | |  | | | |
| **Full** Period for which relief is required  (if you are unsure please contact the Business Rates Section) | | | | | | | / / to / /  (DD / MM / YYYY) (DD / MM / YYYY) | | | |
| 2 | | |  | | | | | | | |
| Do you have, or have you had, a non-domestic rates liability at any other property anywhere in  England during the period for which relief is required? **YES NO** (please tick)  If ‘YES’, please provide the following details for each property for which you have a Business  Rates Liability (please continue on the back of this form if necessary). | | | | | | | | | | |
| Full Postal Address  including post code | | | | | | Property Reference Number  (as shown on your rates bill) | | | | Has the property been  or will it become occupied  during the period of relief? |
|  | | | | | |  | | | | YES NO **If yes, please give exact**  **date occupied.** |
| **Declaration** | | | | | | | | | |
| **Signature:** | | | | | | | | **Date:** | | |
| Name in full (please print) | | | |  | | | | | | |
| Home Address  Use this address for correspondence?  Please tick: Yes No | | | |  | | | | | | |
| Telephone Number | | | |  | | | | | | |
| Capacity in which signed  (please tick) | | | |  | Ratepayer (Sole trader) | | |  | Ratepayer (Partner) | |
|  | | Other (please state) | |  | Director | | |  | Trustee | |