

Name:

Address:

## REVENUE AND BENEFIT SERVICES P.O. BOX 2, NEWTON ABBOT, DEVON TQ12 4YR TELEPHONE 01626 215000

**Property Number:** 

Reference:

## **National Non-Domestic Rates.**

Date:

Dear Sir / Madam,	
Local Government Finance Act 1988 Application for Rate Relief Re:	
Please complete in BLOCK CAPITALS and return to the above address.	
1. APPLICANT'S NAME:	
ADDRESS	
2. RATEPAYER'S NAME: 3. ADDRESS OF PREMISES ON WHICH RELIEF IS BEING CLAIMED:	
(a) Please describe premises and activities there:	
(b) If used for any other purpose(s) give details:	
4. DOES THE RATEPAYER OCCUPY ANY OTHER PREMISES? YES / NO (a) If YES, are any of these premises situated outside the Teignbridge area?	YES / NO
5. DISCRETIONARY RELIEF:	

(NEW APPLICANTS may wish to describe their organization and its purpose in greater detail on a

If applying for Discretionary Relief please outline your case below.

separate sheet and attach it to this form.

6. IS THE APPLICANT A REGISTERED CHARITY? YES/ NO If YES. Reg. No: If exempt from Registration, please give details:

## 7. CHARITY SHOPS:

Section 64 (10) of the above Act states that a hereditament shall be treated as wholly or mainly used for charitable purposes at any time if at any time it is wholly or mainly used for the sale of goods donated to a charity and the proceeds of sale of the goods (after the deduction of expenses) are applied for the purposes of a Charity.

In view of this, is the property used for the sale of goods? YES/ NO

If YES, please state:
(i) What proportion of shop turnover is donated by the general public? \_\_\_\_\_%

(ii) What proportion of turnover is given by corporate donors? \_\_\_\_\_%

(iii) Please name any business donating goods that represent more than 10% of shop turnover:
(iv) What proportion of turnover is promotional (own logo) items? \_\_\_\_\_%

\*\*IMPORTANT\*\* Please ensure you enclose accounts for the individual \*\*IMPORTANT\*\* shop concerned to support the above figures.

- 8. RELIEF BEING CLAIMED: (see overleaf)
- (a) Mandatory Relief YES/ NO
- (b) Discretionary Relief YES/ NO

Although documents are not required at present, some applicants may be requested to supply the following.

- (i) A copy of the Memorandum and Articles of Association or Rules of the Association, and
- (ii) Copies of the Audited Accounts for the last two years

9. HAVE YOU RECEIVED ANY STATE AID WITHIN THE LAST 3 YEARS? YES/NO If YES, how much?

## **DECLARATION:**

I hereby certify that the particulars given above are correct to the best of my knowledge and belief. NAME:

ADDRESS:

TELEPHONE NO.

**SIGNED** 

DATED:

**CAPACITY IN WHICH SIGNED:** 

**Please note:** Random inspections of the property and relevant records concerned may be undertaken without prior notification.

The information you have given on this form will be put onto a computer system registered under the 1998 Data Protection Act.