BUSINESS RATES CERTIFICATE OF OCCUPATION / VACATION

Please complete this form if you are moving or have moved from or to a property.

If you have any questions call Business Rates on (01279) 446688 or e-mail business.rates@harlow.gov.uk

Working together for Harlow www.harlow.gov.uk

Name: Address: Please complete all section		
1 Please provide the name(s) of the Bu Title First names	Suness Rates payer(s):	
Company / trading name (if applicable):		
Company reg number:	Charity reg number:	
What is the address of the property you are moving out / have moved out from? Postcode: Regarding this property - are you the Owner? Leaseholder? If the Owner provide sold date: OR If the Leaseholder or Tenant provide lease / tenancy end date: /		
Date you vacated the property: /	/	
	Postcode:	
 If you are moving in / have moved in to a new property please go on to complete section 3 overleaf If you are NOT moving into a new property please provide a forwarding address 		
below and then complete the declaration overleaf ▼		
	Postcode:	

3	 About the property you are moving in / have moved in to. ▶ Only complete this section if you are moving in / have moved in to a property. 	
	What is the address of the property you are moving in / have moved in to?	
	Postcode:	
	Regarding the property above - are you the Owner? Leaseholder? Tenant?	
	If the Owner provide purchase date: OR If the Leaseholder or Tenant provide lease / tenancy start date: / /	
	Date you occupied the property: / /	
Please provide details of what the premises will be used for:		
If any alterations have been made to the property please provide details:		
	Use a separate sheet if necessary.	
Name and address of the landlord / letting agent of the property:		
Name and address of the landlord / letting agent of the property.		
	Postcode:	
Address for Business Rates to bill to (if different to address moving / moved to above):		
	Postcode:	
► Very important!!! – You must now sign and date the declaration below ▼		
	CLARATION: I / We declare that the information given on this form is complete and accurate to the best of my / our knowledge and belief.	
Ũ	ture(s):	
Name	e(s):	
Positi	on(s):	
Date:	/ / Daytime telephone number:	
E-mail	(You do not have to supply a telephone number but it would be useful should any queries arise).	
 Your business will soon be sent a new bill showing how much you owe. (For a simple and convenient method of making payments, please pay by Direct Debit). 		
 Once completed and signed send this form to: REVENUES & BENEFITS, HARLOW COUNCIL, CIVIC CENTRE, THE WATER GARDENS, HARLOW, ESSEX CM20 1WG How we will use your information 		
The Counc public func bodies res	The Council uses your personal information in order to administer and enforce Council Tax under the Local Government Finance Act 1992. This authority has a duty to protect public funds it administers, and may use information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information, see www.harlow.gov.uk/data-matching on Harlow Council's website. The Council will also use the information for the purpose of performing any of its statutory enforcement duties and any disclosures required by law.	