BUSINESS RATES REQUEST FOR INFORMATION FORM

Please complete this form to identify the person(s) liable to pay Business Rates (Non-Domestic Rates), to establish correct liability and also to decide if any relief should apply. If you have any questions call Business Rates on (01279) 446688 or e-mail business.rates@harlow.gov.uk



Name: Address:		Date form issued:	it ref (<i>if known</i>):						
Regarding this address (if diffe	rent to above):								
Property reference (if known):									
► Please co	omplete all sections i	n CAPITAL LETTERS	V1.7 14/1/2011						
Please provide details of	our business: (Please answer all quest	tions)						
A. Is your business a limited of	company? Y	es 🗌	No						
If Yes, please provide the foll	owing details: C	ompany reg number:							
Company name:									
B. Is your business a charity?	Y	es 🗌	No						
If Yes, please provide the foll	owing details: C	harity reg number:							
Charity name:									
C. If your business is not a co	mpany / charity wh	at is your trading nan	ne?						
D. Please provide the names of Title First names Surna			ors of the company: Postcod						
E. Address for correspondence	ce (if different to th	e above property):							
	Postcode:								
F. What is the nature of your	business?								
► Now go on to complete	e sections 2. 3 &	4 and the declarat	ion overleaf ▶						

2	Ak	out th	ne pro	pe	rty: (Pleas	e answe	er all a _l	pplica	able q	quest	ions)						
	A.	Are yo	u the	own	er? [Le	easeho	older	?		Ten	ant?	· _]			
	В.	If you	are th	e ow	ner p	lease	e provid	le the	date	you p	purcl	hased	d the	pro	perty	' ;		
	OR If you are the leaseholder / tenant please provide the date your lease / tenancy started:																	
									/	•	/							
	C.	Date y	ou oc	cupi	ed th	e pro	perty:		/	,	/							
	D.	Date y	ou co	mme	encec	l trad	ing:		/	1	/							
	E.	from t	he pro	pert	y:		e NOT t		OR									ding
		If you	are th	e lea	iseno	ider /	tenant	please	e tell	us tr	ne ov	vner	s nai	me a	nd ac	adres	SS:	
													Pos	stcoc	e:			
	F.	Do yo	u inter	nd to	mak	e any	alterat	ions to	o the	prop	erty	?	Υ	es			No	
3 Do you pay Business Rates for any other properties? Yes No If Yes, please provide the address(es) below:																		
	i Tes, piease provide trie address(es) below.																	
4 Please provide the forwarding address of the previous occupier / owner:																		
													Pos	stcoc	e:			
		Verv	imno	rtar	o#!!! _	- You	u must	now	siar	n anı	d da	to th				n he	olow '	•
D		CLA				l :	I / We ded	clare tha	at the i	nform	ation (given c	n this					
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Po	sitic	on(s):																
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	mail	oddroos		,			(You do no	t have to	supply a	telepho	one nur	mber but	it wou	ld be u	seful sh	ould any	queries a	arise).
E-mail address: 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). Donce 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 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.