

NATIONAL NON DOMESTIC RATE - OCCUPATION FORM

In order that the correct information for rating purposes may appear in the Council's records, please complete all relevant questions in block capitals, sign where indicated and return this form to the Business Rates section at the above address. If you have any questions call Business Rates on (01772) 625238/9 or e-mail revenues@southribble.gov.uk

| | | |
|---|--|--|
| Address of Property | | |
| Name of Occupier | | |
| Company Name | | |
| Company Registered Address | | |
| E-mail Address | | |
| Tel No | | |
| Company Registration Number | | |
| Date of Completion / Date Tenancy Commenced | | |
| Date of Occupation (enter date on which goods/equipment were placed in the property) | | |
| Name and forwarding address of previous occupier (if known) | | |
| Your Home Address (if you are a sole trader) | | |
| E-mail Address | | |
| Tel No | | |
| Name and Address of the Owner / Landlord (if you are renting the property) | | |
| Tel No | | |

DECLARATION

In my capacity as _____ (office held) I am authorised to submit and sign this application on behalf of the organisation and I declare that the information provided is true and accurate to the best of my knowledge and belief.

Signed: _____

Dated: _____