



BUSINESS RATES- REQUEST FOR INFORMATION

Please complete this form to identify the person(s) liable to pay the Non Domestic Rates, to establish the correct liability and to determine if any relief should apply. If you have any queries please call 01282 425011 or e-mail localtaxation@burnley.gov.uk

Return To: Business Rates, Revenues and Benefits Service, Parker Lane, Burnley BB11 2DS

NAME:..... ADDRESS:.....POSTCODE.....	Business Rates Account Ref: <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:12.5%;"></td> </tr> </table> Date Form Issued: <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:30%;"></td> <td style="width:5%; text-align: center;">/</td> <td style="width:30%;"></td> <td style="width:5%; text-align: center;">/</td> <td style="width:30%;"></td> </tr> </table>												/		/	
	/		/													

Address of business premises (if this is different to the one shown above):

.....Property Reference (if known):

PLEASE USE BLACK INK AND COMPLETE ALL SECTIONS IN CAPITAL LETTERS

A. ABOUT THE BUSINESS (Please answer ALL the questions)

1. Is your business a limited company? YES NO

If Yes, provide the following details COMPANY REG NUMBER

Company name:

2. Is your business a charity? YES NO

If Yes, provide the following details CHARITY REG NUMBER

Charity name:

3. If your business is not a company/charity what is your trading name:

4. Please provide the names and addresses of the traders OR the directors of the company

Title	First names	Surname	Address	Postcode
.....
.....
.....
.....
.....

5. Address for correspondence - If it is a limited company we will use the registered office address as shown on Companies House unless a specific **WRITTEN** request is made to use another address.

6. What is the nature of your business?

Now complete sections B, C and D and the Declaration on the next page

B. ABOUT THE PROPERTY: (Please answer **ALL** relevant questions)

1. Are you the owner? Leaseholder? Tenant?

2. If you are the owner, please provide the date that you purchased the property;

OR

If you are the leaseholder/tenant please provide the date your lease/tenancy started:

3. Date you occupied the property

4. Date you commenced trading

5. If you are the owner but are **NOT** trading from the property please tell us who is trading form the property;

OR

If you are the leaseholder / tenant please tell us the owner's name and FULL address:

Please supply a copy of the lease, tenancy, or written agreement within the next 14 days. If the agreement has been a verbal one, please supply details of the agreement including the commencement date and the length of time that has been agreed, e.g. 6 months.

6. Do you intend to make any alterations to the property? YES NO

C.

Do you pay Business Rates for any other properties? YES NO

If **YES**, please provide the address(es)

<input type="text"/>	<input type="text"/>
----------------------	----------------------

D.

Please provide the forwarding address of the previous occupier/owner:

<input type="text"/>
POSTCODE:

YOU MUST NOW COMPLETE THE DECLARATION BELOW

DECLARATION: I / We confirm that the information provided on this form is correct

Signature(s):

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Name(s) (Please print):

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Position(s) in organisation:

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Date:

Daytime Telephone Number:
(Optional)

E-mail address: