

Revenues and Benefits, Newcastle City Council, Civic Centre Newcastle upon Tyne, NE1 8QH Phone: 0191 278 7878

Fax: 0191 277 4762

<u>E</u>mail: business.rates@newcastle.gov.uk Web address: <u>www.newcastle.gov.uk/businessrates</u>

Application for the Remission of National Non-Domestic Rate

#### **Explanatory Notes**

In certain circumstances the council can agree to pay all or part of your National Non-Domestic Rate contribution, on your behalf, from the Council Tax fund.

To do this a panel of Councillors is required by law to be satisfied that:

- (a) You would suffer "hardship" if you have to pay in full, and
- (b) It is in the interests of the Council Tax Payers who have to subsidise any amounts which are remitted.

In this form we ask you to provide the information we feel the Councillors need to make a decision. You are not obliged to answer any questions you do not wish to. However, it is in your best interests to provide the Councillors with as much information as possible so that they can make a fully informed decision.

If you decide not to answer any question you must say why in the space provided.

If we need any additional information about your circumstances, we may contact you.

ACCOUNT REFERENCE NUMBER:				
ADDRESS OF THE PROPERTY ON WHICH THE CLAIM IS MADE				
Postcode				
YOUR CURRENT ADDRESS				
Postcode				
TELEPHONE/FAX NUMBER ————————————————————————————————————				
E-MAIL ADDRESS				
SECTION 1: YOUR BUSINESS DETAILS				

<sup>&</sup>lt;sup>1</sup> Section 49, Local Government Finance Act 1988

1.1	Are you still trading?	YES	NO
1.2	If you are not trading please tell us when you stopped		
1.3	If you have disposed of the property please tell us:		
(a)	The date of sale or date you surrendered the lease		
(b)	The name, address, and telephone number of the purchaser or landlord		
•	Telephone Number		
1.4	Please tell us about your business, for example:		
	The type of trade or business you are (or were) involved in		
	The number of years you have been in (or were in) business		
	The number of staff employed by the business		
1.5	Please tell us what has happened that has resulted in the business being u	unable to pay	the rates
-			
•			
1.6	Please let us know what advice (if any) you have been given by your accountant	or Insolvency F	Practitioner
1.7	Please provide us with evidence of any details of proceedings or arrangements you have w	ith other creditor	·····
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1.8	Please supply your most recent accounts (preferably audited) for the past	2 years.	
1.9	Please supply a copy of your Constitution, or Memorandum and Articles of Associ	ation (if applica	ıble)

## 2.1 Please provide us with the details of all the people who live in your home:

Name	Relationship to Applicant	Age	Employed	Dependant
Yourself	Applicant		YES/NO	YES/NO
			YES/NO	YES/NO

# 2.2 Please provide us with the details of your households' average monthly income:

This may include wages/salaries/pensions/ government allowances/benefits and investment interest/unearned income.

Source of Income	Amount	Recipient
Grand Total		

## 2.3 Please provide us with your average monthly expenditure:

Expenditure	Weekly	Monthly
Domestic Mortgage or Rent		
Domestic Insurance		
Council Tax		
Water Rates		
Electricity		
Gas		
Other Fuel		
Telephone		
Motor Vehicle Fuel		
Motor Vehicle Road Tax		
Motor Vehicle Insurance		
Other Transport		
Food		
Household Items		
Clothes		
TV Licence		
Other		
Grand Total		

#### 2.4 Financial Summary

Please enter the Income and Expenditure Grand Totals:

Summary of Financial Details	Amount
Total Income	
Total Expenditure	
Difference	

If your current expenditure is greater than your current income please let us know whether you are receiving additional funding to help you out.

#### **SECTION 3: RATES REMISSION ON THE GROUNDS OF HARDSHIP**

.1 Please tell us here why you would suffer "hardship" if the City Council did not grant a remission of your rates and why you feel it would be in the best interests of Council Tax payers to subsidise the remission of your rates
SECTION 4: YOUR DECLARATION:
o the best of my knowledge and belief, the information given in this application is correct and
omplete. I understand that any person who, by deception, dishonestly obtains any pecuniary
dvantage shall be liable to prosecution under sections 15 and 16 of the Theft Act 1968.
SIGNATURE DATE
he completed forms (and any necessary supporting documents) should be returned to;
levenues and Benefits (NNDR Team), lewcastle City Council, civic Centre, lewcastle upon Tyne, IE1 8QH.

or alternatively email the form and supporting information to business.rates@newcastle.gov.uk

Enquiries may be made to the Revenues Division Tel 0191 278 7878, or by calling at the Customer Service Centre in the Civic Centre.

(The financial details you supply will be verified using both internal and external references)

### ADDITIONAL SHEETS: YOUR FINANCIAL DETAILS (CONTINUED)

## 2.1 Please provide us with the details of all the people who live in your home:

Name	Relationship to Applicant	Age	Employed	Dependant
Yourself	Applicant		YES/NO	YES/NO
			YES/NO	YES/NO

## 2.2 Please provide us with the details of your households' average monthly income:

This may include wages/salaries/pensions/ government allowances/benefits and investment interest/unearned income.

Source of Income	Amount	Recipient
Grand Total		

### 2.3 Please provide us with your average monthly expenditure:

Expenditure	Weekly	Monthly
Domestic Mortgage or Rent		
Domestic Insurance		
Council Tax		
Water Rates		
Electricity		
Gas		
Other Fuel		
Telephone		
Motor Vehicle Fuel		
Motor Vehicle Road Tax		
Motor Vehicle Insurance		
Other Transport		
Food		
Household Items		
Clothes		
TV Licence		
Other		
Grand Total		