

Reference No:

Application for Hardship Relief

Please use this form to apply for rate relief in regards to your National Non-Domestic Rates Bill under section 49 of the Local Government Finance Act 1988.

Section 1 Details of your organisation

Name of your organisation:

Address (including postcode) of your organisation:

Website address:

Phone no

E mail address

Section 2 Reason for Application

**PLEASE SET OUT GROUNDS FOR YOUR APPLICATION FOR
HARDSHIP APPLICATION ON A SEPARATE SHEET.**

Your application will be considered by a Panel that does not consider representations in person at its meetings so it is important that everything you wish to be taken into account is included in your written application.

Section 3 Details of the premises for which application is being made

Address.

Period for which application is being made.

Amount of Relief

Is This Your First Application For Hardship Relief?

If not, when did you last make application?

Please state your legal interest in the property. (e.g. are you the current freeholder/ leaseholder)

Do you still trade from the Watford property(s)?

No Date of Vacation:
Yes

Have you placed the property on the market?

No
Yes When:

Name and address of agent:

Have you ever appealed to District Valuer for a reduction in the rateable value of the property?

No
Yes When:

Please give the details of the outcome below.

Are you the subject of insolvency proceedings?

No

Yes Please give details below.

The following is a list of documents required to substantiate your case.

Please use it as a checklist before returning your application.

Certified copies of your last 3 years accounts.

Copies of your organisations bank statements showing showing the current financial period. (All periods not covered by the certified accounts above)

A list of current creditors and debtors, showing current balance of debts. (For all periods not covered by the certified accounts above)

IF YOU ARE A SOLE TRADER please complete the attached Financial Statement

IF YOU ARE IN A PARTNERSHIP, please complete the attached Financial Statement for each partner.

Section 4 Declaration

I declare that the information that I have given on this form and any attachments are accurate and to the best of my knowledge and belief. I understand that any incorrect or

misleading information will result in any relief granted being cancelled and being immediately due and payable.

Name in CAPITALS:

Signature:

Position held in organisation:

Date:

PLEASE RETURN THE APPLICATION FORM TO:

Revenues Manager
Watford Borough Council
Town Hall
Watford
WD17 3EX

For further information, or for help in completing this form please phone the Revenues Manager on 01923 278134 during normal office hours.

The information supplied will be treated in the strictest confidence.

Financial Statement		Pg 1 of 2	
Please answer the following questions regarding your financial situation			
INCOME	£	EXPENDITURE	£
Your wage/salary		Gas and Electricity	
Partner's Wage/Salary (if applicable)		Fares/Petrol	

Pensions		Rent/Mortgage	
Unemployment benefit		Water	
Child benefit		Housekeeping	
Social Services benefits		Council Tax	
Other benefits (state type)		Telephone	
		Life/accident insurance	
		Property/contents insurance	

Do you have a legal interest in any other properties? (for example lease or freehold?)

Please give addresses, current value and outstanding mortgages of each property, if any, on a separate sheet of paper.

No

Yes Please give details below. Please include income received, rent payable and if weekly, monthly, quarterly or annually.

Value of bank loans (other than mortgage)

Income from and value of other investments or assets:

Please provide details of any other income, specify below:

Please provide details of any other expenditure, specify below: