

APPLICATION FORM FOR RATE RELIEF FOR BUSINESSES IN DESIGNATED RURAL SETTLEMENTS

PART A – To be completed by all Applicants Before you answer the questions below, please read the guidance notes.		
Name of Occupier/Applicant:		
(a) Property Reference Number (b) Account Reference Number Both of these numbers appear on your Rates Bill		
3. Address of Property to which the application refers:		
4. Date of Occupation (if after 1 April 1998):		
 Type of Business: e.g. General Store, Post Office, Public House, Petrol Filling Station, other shop selling household foods etc. (Please state) NB If your Property is not a General Store, Public House, Food Shop, Post Office or Petrol Filling Station you will not be eligible for the 50% mandatory element of relief. Other types of business may be considered for up to 100% discretionary relief if Part B below is completed. 		
 6. If a General Store or Food Shop, please describe (1) Type of goods sold (see notes) (2) (a) Percentage of sales of Food (b) Percentage of sales of Household Goods (c) Percentage of sales of Confectionery 		
7. Is your Property, to the best of your knowledge, the only business of its type in the rural settlement?	YES/NO * Please delete whichever is not applicable	
8. Rateable Value (this can be found on your Rate Bill) NB: Mandatory and discretionary relief can only be granted if the property is within the limits set by the government. Please see the guidance notes for full details.		

PA	 in either of the following categories; a) Up to 50% relief in addition to the mandate b) Up to 100% relief - any other business whe relief 	ory element
1.	Please give full details of the use of the Property and describe the business carried out.	
2.	Please give the location of the nearest alternative business to your own, i.e. if your business did not exist, where would local residents go for the service you provide?	
3.	Does your business provide employment for local residents?	
	If so, for how many people? If your business is a Public House please complete Section 4. If not go to Section 5.	
4.	(a) Are any local sports/interest groups run from your premises?	
	If so, please give full details.	
	(b) What percentage of total sales are comprised of:	
	(i) drink (ii) food	
5.	Please state how and why you believe your business benefits the local community, e.g. what effect would it have if your business ceased to trade? (Please continue on a separate sheet if necessary)	
	LARATION nformation given above is, to the best of my knowledge	e, correct.
Sign	ed	Date
CapacityContact telephone number		
Whe	n completed this form should be returned to:	

East Staffordshire Borough Council, PO Box 8045, BURTON UPON TRENT, DE14 9JG Telephone: 01283 508030 9.00am – 1.00pm Monday – Friday Email: nndr@eaststaffsbc.gov.uk