Our Ref: Please Contact: Telephone:

Fax:

Email:

act: Business Rates 01422 393699

REOCCUPY

business.rates@calderdale.gov.uk



Revenues Services PO Box 51 Halifax HX1 1TP



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Name of ratepayer (including Limited Company name and / or trading name where applicable):
Correspondence address:
Email address:
Contact telephone numbers:
Address of property where Reoccupation Relief sought:
Account Reference No:
Section A – about the past use of the property
(i) What was the former use of the property for which you wish to claim Reoccupation Relief?
(ii) What is the date on which you believe the property was last occupied?
(iii) What is the name and address of the owner of the property and/or their marketing agents?

Section B – about the current / future use of the property			
(i) On which date will the	property be reoccupied?		
(ii) What is the nature of the business which is now trading or will trade from the property?			
Your State Aid declaration Please read this carefully before you sign and date it			
I confirm that being granted Reoccupation Relief in respect of the above property will not cause me / my business to exceed the limit of €200,000 in total State Aid within the current financial year and/or the two previous financial years.			
The application must be signed by the ratepayer or a person authorised to sign on behalf of the ratepayer. This means, where the ratepayer is $-$			
 (a) a partnership, a partner of that partnership: (b) a trust, a trustee of that trust; (c) a limited company, a director or company secretary (d) in any other case, a person duly authorised to sign on behalf of the ratepayer 			
Signed:		Date:	
Please print your name _			
Position in organisation _			
Tel. Number:	Email		
What next?			
Return the form to:			
Calderdale Council			
Revenues Services PO Box 51			
HALIFAX HX1 1TP			