

Application for reduction or remission of Non-Domestic Rates by charities or other bodies not established or conducted for profit

Mandatory relief of 80% - in accordance with either Section 43(5) or 45(5) of the Local Government Finance Act 1988, *and/or*

Discretionary relief – in accordance with Section 47 of the Local Government Finance Act 1988.

1. DETAILS OF THE PROPERTY FOR WHICH RELIEF IS REQUESTED	
Business Name	
Business Address	
Contact Details	
a) Purpose for which used b) Is the property used for any purpose by another organisation? c) Details of any sub-letting	
2. PARTICULARS OF THE ORGANISATION	
a) Is it a registered charity? If so, please quote the registration number. b) Is the organisation recognised as a charity for income tax purposes? c) Is the organisation a community amateur sports association? d) What are the objects of the organisation?	

The following additional information is required in respect of organisations applying for DISCRETIONARY relief.

3. PARTICULARS	
<p>a) What services are performed or activities carried out?</p> <p>b) To what extent are the membership and benefits available to the general public?</p> <p>c) Is the organisation affiliated to any other body?</p> <p>d) Is there a written constitution? If so, a copy should be enclosed.</p>	

4. A COPY OF THE LATEST AUDITED OR PUBLISHED REPORT AND ACCOUNTS SHOULD ACCOMPANY THIS APPLICATION.

THE FOLLOWING PARTICULARS OF INCOME SHOULD BE GIVEN UNLESS THEY ARE CLEARLY SHOWN IN THE ACCOUNTS.

<p>a) Income from investments</p> <p>b) Income from land or buildings not occupied by the organisation or from sub-letting any part of the property.</p> <p>c) Profits from any trade or business activity.</p> <p>d) Receipts from social functions.</p> <p>e) Receipts from sales of commodities or services provided.</p> <p>f) Charges for admission to sports facilities.</p> <p>g) Contributions, gifts, or donations from other organisations or bodies.</p> <p>h) Subscriptions or membership fees.</p> <p>i) Grants from Local Authorities or other public bodies. Please provide proof.</p> <p>j) Voluntary contributions/fundraising</p> <p>k) Other income.</p>	
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PLEASE COMPLETE THIS SECTION IN ALL CASES

I certify that the information supplied is correct to the best of my knowledge and belief and that the organisation to which they refer is not established or conducted for profit.

Signature Date

Capacity in which signed, or designation

Address
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.....
.....

Tel No

When completed, please return this application to:

NNDR Team (Haringey)
PO Box 55280
London
N22 9EN