

Application for a refund of rates

Please provide the following details in respect of the rating to which this application refers.

If you are making an application for more than one rating please use a separate application form in respect of each.

Further forms are available on request from your Staff Officer or can be downloaded together with the "Rates information Sheet" from the councils website at www.cavancoco.ie.

1 Applicant		
Name Applicant		
Address		
2 Property Location		
Property Address		
Townland		
Towntand		
3 Rating		
Confirm if you are:		
☐ Owner		
Immediate lessor		
Occupier Occupier		

4 Rate bill information		
The following information is available on your rate bill and should be provided in		
respect of each application.		
Customer ID		
Rate No (ED/TL)		
VO No		
Rateable Valuation		
Amount of Annual Rates		
Desc/Type		
Electoral Division		
5 Claims in respect o	of periods of vacancy	
5 Claims in respect of periods of vacancy Period during which the rating was vacant (Please provide precise dates, e.g.		
_	racing was vacant (riease provide precise dates, e.g.	
22/02/2007).		
From		
То		
Was the property for sale at any time during the period of vacancy? ☐ Yes ☐ No		
State the amount of rates which you are requesting to be refunded (i.e. 1/12 of the		
annual rates for each complete calendar month of vacancy. Amounts for periods of		
less than one month are not refundable).		
Amount		
State the reason for you	r request for a refund of rates in respect of the above rating	
(e.g. The bonafide inability of the landlord to obtain a suitable tenant at a		
reasonable rent or alternatively for the execution of repairs/alterations).		

6 Check list of required documentation		
Have you enclosed letter from Auctioneer / Architect?		
☐ Yes		
□ No		
Have you enclosed original full page newspaper advert / webpage?		
Yes		
□ No		
<u> </u>	s of receipts totalling to the amount of your claim?	
☐ Yes ☐ No		
☐ 140		
7.0		
7 Receipts		
Number of receipts issued to make up the total claimed		
Detail receipt numbers a	nd	
amount of each receipt		
Are the receipts issued in your name?		
☐ Yes		
☐ No		
If no, detail your reasons	for	
claiming a refund in resp	ect	
of the attached receipts		
8 Declaration		
I declare that I have read	in full the "Rates Information Sheet" provided to me by the	
Staff Officer at the time of service of the rate bill, that my application satisfies fully		
the criteria stated therein and that I have provided all of the required supporting		
documentation detailed in the Rates Information Sheet.		
I hereby certify that the details and information provided by me are true and correct.		
I acknowledge and accept that this application will not be considered for a refund of		
rates unless it is supported in full by the specified documentation.		
Applicant Signature		
Date		



Required Documentation

Please note your application will not be considered unless it is supported in full by the following documentation

1 Premises vacant and for letting

- a. Letter from Auctioneer confirming the period (provide dates of actual period of vacancy. e.g. 02/03/07 to 31/12/07) during which they tried to let the hereditament **and**
- b. Copy of full page newspaper in which the advertisement for letting was contained. The advert should contain a photograph of the property, state the location and give a full and detailed description of the rated property or
- c. Copy of Auctioneers website containing the details of the property for letting including a photograph of the property. The website should clearly show (in the original computer print and unaltered) the web address and the date the page was printed.

2 Premises closed for alterations and repairs

Provide a letter from an Architect detailing in full the nature of the works being carried out and confirming if the work will result in a material change to the property. The letter should also confirm the date of the original survey and the date for completion of the project. A copy of planning permission and building regulations commencement notice (where applicable) may also be required in addition to this requirement.

3 Receipts in your name totalling to the amount of your claim