

## **BUSINESS RATES**

## **CHARITY RELIEF - APPLICATION FORM**

## Sections 43 & 45 of the Local Government Finance Act, 1988

All applicants must complete Sections A & B in full. Any questions which cannot be answered in the space provided should be continued on a separate sheet.

When completed, please return this form to London Borough of Newham, Business Rate Section, 1000 Dockside Road, London, E16 2QU

Section A					
1.	Th	e name or title of Charity or Organisation			
•	• • • • •		•••••		
2.	a)	Is the organisation a registered Charity YES/NO			
	b)	If not a charity so registered, has application been made for registration	YES/NO		
	c)	If registration is not necessary, state why the organisation is exempted or Excepted from Registration			
	d)	Is the organisation recognised as a charity for tax purposes? <b>YES/NO</b>			
		If so, please provide evidence of this			
	e)	Are you registered as a Community Amateur Sports Club?	YES/NO		

	Details of the property for which relief is sought.:
2	) Description
	b) Address
	e) Purpose(s) for which the property is used ( <b>or intended to be used if empty</b> ). Please give specific use.
	Date of legal possession
	Date of actual occupation
	Terms of tenancy of the premises if occupied but not owned by the Organisation.
	Terms of tenancy of the premises if owned by the Organisation but occupied by it's
	beneficiaries.
	Name, address and telephone number of the <b>Secretary</b> or other <b>Officer</b> or <b>Agent</b> dealing with the affairs of the organisation
	dealing with the diffulls of the organisation
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Section B
Mandatory Relief ( Registered Charities only)
6. a) What are the <b>objects of the Charity</b> ?
b) What was the date and of registration?
c) Please state the <b>registration number of your Organisation</b>
I hereby certify that the statements made are 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
Address
Capacity in which signed
Date
Business Rate Account Number: