Revenues Department

Newcastle under Lyme Borough Council

Castle House

Barracks Road

Newcastle under Lyme

Staffordshire

ST5 1BL

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Date: |  |
| Your Full Name: |  | Property Ref: |  |
| Your Current Address: |  | Account Ref: |  |
|  |  |  |  |

**NON-DOMESTIC RATES NEW OCCUPIER**

Address of the property

|  |
| --- |
|  |

**NEW OCCUPIER DETAILS**

|  |  |
| --- | --- |
| New Occupier |  |
| Is the New Occupier…  | a Limited Company\*/Sole Trader\*/ Partnership\*? | Limited Company Registration Number |  |
| Limited Company Registered Office Address or Sole Trader’s Home Address |  |
| Name & Address of Owner\*/Leaseholder\* (if other than the Occupier) |  |
| Date Stock First Installed\* or Premises First Used\*  |  | Date of Completion of Purchase |  |
| Lease Start Date |  | Lease End Date |  |
| Occupiers Interest in Property | Freehold\*/Leasehold\*/Other…(please specify) |  |

(\*delete as appropriate)

**PREVIOUS OCCUPIER DETAILS**

|  |  |
| --- | --- |
| Name of Previous Occupier |  |
| Date of Vacation |  |
| Forwarding Address |  |

**DECLARATION**

*I declare that the information given on this form is correct to the best of my knowledge and that there are no other changes to my circumstances. I am aware that to make a false statement is a serious offence and it is the Council’s policy to prosecute where any statement can be proven to be false. In certain circumstances a penalty may be imposed where a false statement leads to a loss by the Council.*

|  |  |
| --- | --- |
| Name:  | Signature:  |
| Tel:  | Email:  | Date:  |
| Received by:  |  | Date:  |

(Customer Hub Officer)

**Once you have completed this form, please email it to** **rates@newcastle-staffs.gov.uk**

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