

Civic Centre Rickergate Carlisle Cumbria CA3 8QG Telephone (01228) 817234 cumberland.gov.uk

		NON DOMESTIC RATES
	Account Number: Property Reference:	
	Date	
BUSINESS RATES PROPERTY VACATION FORM		
Please complete this form with details of your vacation and lease end date.		
Full address of property		
1. Full name of occupier:		
2. Date stock moved out of the property:		
3 Name and address of new occupier (if know	/n):	
Date of new occupiers lease/licence (if known))	
4. If you were a leaseholder, please give the f	following information:	
Date of expiry of lease	-	
Full name and address of owner		
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5. If you were the owner and have sold the property please give the following information:		
Date of completion of sale		
Full name and address of new owner		
Name and address of your solicitor		
INAME and address of your solidior		
6. Your address for future correspondence, including final bills:		
·		
Email address if you would like the final bill issued by email		
7. If you have moved to another property in this area please provide the details:		
Address of property		
Date stock first moved in		
If you are the owner, date of completion of purchase		
Name and address of your solicitor		
Name and address of previous owner (if known)		
If you are the tenant, date your lease/licence commences		
Name and address of owner		
8. Declaration: The information I have provided on this form is correct to the best of my		
knowledge and belief.		
Signed Date		
Print name Capacity in which signed		
Day time telephone number		
Email address		

After completing this form, please sign and return your reply to Freepost REVENUES AND BENEFITS SERVICES. Please write this on the envelope in the above format (Capitals), no address is needed.