



BUSINESS RATES

Revenues & Benefits Services, Civic Centre, Carlisle, CA3 8QG

Telephone (01228) 817234

Typetalk 18001 01228 817000 Email: nndr@carlisle.gov.uk

Account number: _____

Property Reference: _____

Date: _____

BUSINESS RATES PROPERTY VACATION FORM

Please complete this form if you have left or sold a property and return to the address above.

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 known) _____

Date of new occupier's lease/licence (if known) _____

4. If you were a leaseholder, please provide the following information

Date of expiry of lease _____

Full name and address of owner _____

5. If you were the owner and have sold the property, please provide the following information

Date of completion of sale _____

Full name and address of new owner _____

Name and address of your solicitor _____

6. 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 details

Address of property _____

Date stock first moved in _____

If you were 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 _____ Mobile number _____

Email address _____