# Rural Rate Relief

Please fill in this form to **apply for rural rate relief** and send it to:

Date:

Business rates account number:

Revenues Team

Council Offices, High Street,
Coleford, Glos
GL16 8HG

**The Data Protection Legislation:** Forest of Dean District Council is the Data Controller for the purposes of the Data Protection Legislation. We will only use your personal information in accordance with the Legislation and for the purposes of Business Rates. We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows us to.

|  |
| --- |
| Details of ratepayer  |
| Full name  |  |
| Property address |  |
| Type of Business |
| **If the property is a General Store with a rateable value of £8,500 or less** |
| Describe the types of food sold (excluding confectionary)  |
| Describe the general household goods sold |
| Is this the only General Store within the Rural Settlement area?  | Yes/No |

|  |
| --- |
| **If the property is a Post Office with a rateable value of £8,500 or less** |
| Is a Post Office licence (Post Office Act 1953) held? | Yes/No |
| Are any goods sold or services offered? | Yes/No |
| If yes, please describe: |
| Is this the only Post Office within the Rural Settlement area? | Yes/No |
| **If the property is a Public House with a rateable value of £12,500 or less** |
| Are the premises used principally for retail sale of alcohol to members of the public to drink on the premises? | Yes/No |
| Is the sale of alcohol subject to the condition that buyers must reside at or consume food on the premises? | Yes/No |
| Is this the only Public House within the Rural Settlement area? | Yes/No |
| **If the property is a Petrol Filling Station with a rateable value of £12,500 or less** |
| Are the premises used to sell petrol or other automotive fuels to the general public? | Yes/No |
| Are the premises used for any other purpose? | Yes/No |
| If yes, please describe: |
| Is this the only Petrol Filling Station within the Rural Settlement area? | Yes/No |
| **If the property is a Village Food Shop with a rateable value of £8,500 or less** |
| Do you sell mainly food for human consumption (excluding confectionery, restaurants, cafes and take aways)? | Yes/No |
| Are the premises used for any other purpose? | Yes/No |
| If yes, please describe: |
| Declaration  |
| If you have any further information which you feel is relevant to the application please give details: |
| Full name |  |
| Signature |  |
| Capacity in which this is signed |  |
| Da |  |
| Email |  |
| Contact telephone number |  |

## Discretionary Rural Relief

The Government announced in the Autumn Statement 2016 that it intends to increase mandatory rural rate relief to 100 per cent from April 2017. For the 2017/18 year this relief will be granted to eligible ratepayers as a discretionary relief and is subject to state aid de minimis levels.

Awards such as this Discretionary Relief are required to comply with the EU law on State Aid. This award shall comply with the EU law on State Aid on the basis that, including this award the ratepayer has not received more than €200,000 in total of De Minimis aid within the current financial year or the previous two financial years. The De Minimis Regulations 1407/2013 were published in the Official Journal of the European Union L352 24.12.2013).

I declare that the above information is correct and that I have not exceeded the De Minimis threshold by accepting this Discretionary Relief.

Name ..................................................................................................................................

Signature.................................................................................................................................

Position in Organisation..........................................................................................................

Telephone...............................................................................................................................

Email ..............................................................................................................................

Date ..................................

For office use only

| **Settlement** |  | **Discretionary rate relief to be granted** | **Yes/No** |
| --- | --- | --- | --- |
| Qualify for mandatory relief | Yes/No | Form checked by and date |  |
| Client Officer |  | Date |  |
| Group Manager  |  | Date |  |