Question 1



Application for Mandatory Rate Relief

Quodion i	
Name of Ratepayer	
Address of Property for which relief is claimed	
Address for correspondence	
(if different from above)	
Business Rates Account Number	
Property Reference Number	
Question 2	
Is the property occupied? YES/NO	
If 'NO', please provide the exact date that the property became empty.	
Question 3	
Has the organisation applied for charitable status? YES/NO	
That the digarillation applied for chantable status:	. 20,110
(a) Registered number of the organisation:-	
(b) If exempt from registration please state reasons	why exempt:-

Question 4

Is your organisation registered with the Inland Revenue as a Community Amateur Sports Club? **YES/NO**

If 'YES', please provide proof of your registration.

Civic Office, Waterdale, Doncaster DN1 3BU Website: www.doncaster.gov.uk

Question 5
What are the main objectives of the organisation?
Trial are the main espectives of the enganication.
Question 6
Please give a brief description of the use of the property for which you are applying for relief.
Question 7
If the organisation is a charity shop, what percentage of items sold are donated goods?
if the organisation is a chanty shop, what percentage of items sold are donated goods?
Declaration
Declaration Name in Full:
Name in Full:
Name in Full: (Please Print)
Name in Full:
Name in Full: (Please Print)
Name in Full: (Please Print)
Name in Full: (Please Print) Address:
Name in Full: (Please Print)
Name in Full: (Please Print) Address: Telephone Number:
Name in Full: (Please Print) Address:
Name in Full: (Please Print) Address: Telephone Number: Fax number:
Name in Full: (Please Print) Address: Telephone Number:
Name in Full: (Please Print) Address: Telephone Number: Fax number: Email address:
Name in Full: (Please Print) Address: Telephone Number: Fax number:
Name in Full: (Please Print) Address: Telephone Number: Fax number: Email address:
Name in Full: (Please Print) Address: Telephone Number: Fax number: Email address: Position Within the Organisation: I declare that the particulars given are correct to the best of my knowledge and belief.
Name in Full: (Please Print) Address: Telephone Number: Fax number: Email address: Position Within the Organisation:

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