

**State Aid De Minimis Declaration and Confirmation of Business Use in respect of**

Business rates account number: \_\_\_\_\_

Property address: \_\_\_\_\_

**What type of business is carried out at the above property?** e.g. Florist, green grocer etc.

--

**Please provide a description of the actual use of the property including details of the goods/services provided.** e.g. the sale of cut flowers, the sale of fresh fruit and vegetables etc.

--

**Is your property accessible by members of the public? YES / NO** (delete as applicable)

--

**State Aid**

Business rates relief are a form of state aid, we must know if you have received or are receiving any other state aid in the last three financial years.

Please read the accompanying state aid guidance and complete and sign **one** of the following two declarations, your application will not be considered without this form being completed

**Declaration 1:**

I confirm that the organisation named below **has not received De Minimis aid** during the previous 3 financial years (this being the current financial year and the previous two financial years)

By signing below, I confirm that I understand the requirements of De Minimis (EC Regulations 1407/2013), that the information set out above is accurate for the purposes of the De Minimis exemption and that I am authorised to sign on behalf of

\_\_\_\_\_ (Please insert name of ratepayer)

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

Business: \_\_\_\_\_ Position: \_\_\_\_\_

**Declaration 2:**

I confirm that the organisation named below **has received the following De Minimis aid** during the previous 3 financial years (this being the current financial year and the previous two financial years)

<b>Amount of De Minimis aid</b>	<b>Date of aid</b>	<b>Organisation providing aid</b>	<b>Nature of aid</b>

(Continue on a separate sheet if necessary)

By signing below, I confirm that I understand the requirements of De Minimis (EC Regulations 1407/2013), that the information set out above is accurate for the purposes of the De Minimis exemption and that I am authorised to sign on behalf of

\_\_\_\_\_ (Please insert name of ratepayer)

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

Business: \_\_\_\_\_ Position: \_\_\_\_\_