

## Discretionary Relief Application Form

Please complete all information on this form and send it to the Business Rates Team,  
Council Offices, PO Box 304, Ashton-under-Lyne, Tameside, OL6 0GA  
Contact telephone number: 0161 342 2045

|  |  |                          |           |  |
|--|--|--------------------------|-----------|--|
| <b>Name of organisation</b>  |  |                          |           |  |
| <b>Contact Details</b>   | <b>Telephone Number:</b>   |                          |           |  |
|  | <b>E-mail Address:</b>   |                          |           |  |
| <b>Address of property for which relief is claimed</b>   |  |                          |           |  |
| <b>Business Rates Reference</b>  |  |                          |           |  |
| <b>What is the type of Organisation?</b>   | <b>Not for Profit Organisation</b>   | <input type="checkbox"/> |           |  |
|  | <b>Voluntary, Community and Faith Sector</b>   | <input type="checkbox"/> |           |  |
| <b>When did this organisation first occupy this property? (DD/MM/YYYY)</b>   |  |                          |           |  |
| <b>If the organisation is exempt from registration, please state grounds</b>   |  |                          |           |  |
| <b>What is the property used for?</b>  |  |                          |           |  |
| <b>Does the property have a Rateable Value of £18,000 or less?</b>   | <b>Yes</b>   | State RV (if known)      | <b>No</b> | State RV (if known)  |
|  |  |                          |           | <b>If above £18,000 the property will not qualify for relief</b> |
| <b>Please state what right you have to occupy the property (Please tick)</b>   | <ul style="list-style-type: none"> <li>• The organisation owns the freehold of the premises <input type="checkbox"/></li> <li>• The organisation owns a long leasehold of the premises (21 years or more) <input type="checkbox"/></li> <li>• The organisation rents the premises from a landlord <input type="checkbox"/></li> <li>• The organisation has no formal right to occupy the premises <input type="checkbox"/></li> <li>• Other (please state):</li> </ul> |                          |           |  |
| <b>If the organisation rents this property, please give the landlords name, address and telephone number</b>               |  |                          |           |  |
| <b>Is the property occupied (or partly occupied) by any other person or organisation? If yes, please give full details</b> |  |                          |           |  |

## DETAILS OF THE ORGANISATION

Please answer yes, no or not applicable to the following

|    |  |
|----|--|
| 1. | Are there any restrictions placed on membership of the organisation?   |
| 2. | Can membership be obtained immediately? If not, why not? And how long before membership can be obtained?   |
| 3. | What are your organisation's annual membership fees? How are the fees payable? E.g. £1 per week, £200 per year.  |
| 4. | Does your organisation provide training/coaching by a qualified person? If yes, please state if there are any additional costs to the member, and if so, how much?   |
| 5. | Are there any special coaching arrangements in place which are specifically targeted to young members?   |
| 6. | Can non-members use the sporting facilities you provide? If yes, please give circumstances and costs   |
| 7. | Does your organisation actively encourage membership from under-represented and specific members of the community e.g. young people, the elderly or ethnic minorities? If yes, please provide evidence e.g. advertisement leaflets   |
| 8. | Does your organisation receive any additional aid?<br>(Central or local government granted, lottery funding, contribution from national affiliation?) If yes, please provide evidence of the grants you receive*.<br><br><b>Failure to disclose details of all funding may lead to the withdrawal of any relief awarded.</b> |
| 9. | What links (if any) does your organisation have with the local authority?<br>(Do you accept membership referrals, or do you participate in road shows/seminars organised by the authority etc.?)   |

| <b>Evidence Check List</b>   |  | <b>Please Tick</b> |
|--|--|--------------------|
| <b>(If the below information is not provided your application will be invalid)</b> |  |                    |
| <b>1.</b>  | <b>Evidence that the organisation provides significant benefit to Tameside residents</b> |                    |
| <b>2.</b>  | <b>Copy of Memorandum and Articles of Association</b>                                    |                    |
| <b>3.</b>  | <b>Copies of Audited Accounts and Balance Sheets for the last 2 years</b>                |                    |

**Declaration**

I confirm that the information provided to the Council is accurate and complete. I understand that false information may invalidate any relief awarded and may lead to further action against the organisation and the person signing the form.

|  |  |                    |
|--|--|--------------------|
| <b>Signature</b>                               |  | <b>Print name:</b> |
| <b>Position in Organisation</b>                |  |                    |
| <b>Date</b>                                    |  |                    |
| <b>Correspondence address for Organisation</b> |  |                    |

**I UNDERSTAND THAT THE AUTHORITY UNDERTAKES REGULAR INSPECTIONS OF PREMISES WHICH HAVE BEEN AWARDED RATE RELIEF**