

PO Box 2 Forde House, Newton Abbot TQ12 4YR Email: revandbens@teignbridge.gov.uk DX121075 Newton Abbot 5

Property Address:	Non Domestic Rate			
Post Code:				
In order to establish your correct liability to Busi by email or post as soon as possible. (Addresse	ness Rates please complete this form and return it es are shown above)			
To be completed in all circumstances.				
1. Business Name (Limited Company / Trading	name)			
	_			
Are you a Limited Company? Yes / No	If Yes, Company Number:			
If No, Please list names and addresses of all co	empany partners			
2. Business Description:				
3. Correspondence Address – We will use the Funless you provide an alternative address below	Registered Office (for limited companies) or unit, v:			
4. Do you own this property? Yes / No	If Yes, Completion Date/			
If No,				
Please provide name, address and telep	hone number of the owner:			
Lease Start date://	Lease End date:/			
5. Date of occupation (or date you expect to occ	cupy)/			

6. Do you wish to apply for Small Business Rate Relief? * Yes / No	
If Yes; Do you, or any of your partners, or does your limited corbusiness premises in England? Yes / No	mpany occupy any other
If Yes; Please state address and local council:	
7. Do you wish to apply for Charitable Relief?	Yes / No
8. Do you wish to apply for Village Shop Relief? *	Yes / No
9. Is this a listed building?	Yes / No
10. Is any part of the property used as residential accommodation?	Yes / No
Declaration I declare that the information I have given on this form is correct, to the	e best of my knowledge.
Name: Signed:	
Position in Company: Date:	/
Telephone Number:	
Email:	
We are committed to ensuring that your privacy is protected by adhering to Protection Regulation (GDPR). Your personal identifiable information provupdating Business Rate records, and contacting you regarding this. Your p	

a lawful reason to do so, for example disclosure is necessary for crime prevention or detection. The data will be stored and retained in accordance with our full privacy policy at www.teignbridge.gov.uk/privacy

Notes

*Small Business Rate Relief

Rate relief is available to ratepayers who occupy either (a) one property with a rateable value of up to £15,000, or (b) one main property (as before) and other additional properties with rateable values less than £2,900. All rateable values added together must be less than £20,000.

*Village Shop Relief

If you are the occupier of the only general store or Post Office in a rural settlement and your rateable value is less than £8,500 you may qualify for Village Shop Relief. You may also qualify if you occupy the only Village Pub or Petrol Filling Station with a rateable value of less than £12,500.

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Teignbridge
 District Council will notify you 10 working days in advance of your account being debited or
 as otherwise agreed. If you request Teignbridge District Council to collect a payment,
 confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Teignbridge District Council or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Teignbridge District Council asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

Teignbridge Instruction to your South Devon	our Bank or Building Society to pay by Di	rect Debit) DIR De	ECT bit	
Please fill in this form and return to: Teignbridge District Coun	cil PO Box 2 Forde House Newton Abbot TQ12 4YR					
Name and full postal address of your Bank or Building Society	Payment will be made on either the 1 st or 15 th of every month. Please tick the payment date	Origir	Originators Identification Number			
To: The Manager Bank/Building Society	and frequency of your choice.		8 8		7	
Address:	15 th					
	Monthly Apr-Jan Monthly Apr – F	⁼ eb	Mo	onthly Apr	- Mar	
Name(s) of Account Holder(s)						
	Instruction to Bank or Building Society Please pay Teignbridge District Council from the a assured by the Direct Debit Guarantee. I understand Council and, if so, details will be passed electronically	that this instructi	ion may remai			
Bank/Building Society account number Branch So	ort Code					
	Signatur	e				
Business Rate Reference Number	Date					
	Banks	s and Building So	cieties may no	accept Dire	ect Debit	

instructions for some types of account