

Application for Discharge of Rates in respect of Unoccupied Premises

Commercial Rates remain payable on vacant property. Where a property is vacant on the date of making the rate owners must complete this form and submit it to the Rates Department, along with relevant supporting documentation, in order to claim a discharge of rates on vacant premises.

From January 2018 owners will be liable for a minimum of 10% of the total commercial rates due in respect of their vacant commercial premises. This <u>must</u> be paid before a VPA credit will be applied to a rate account.

Section 1 (Please complete in f	ull)									
		Re	elevant I	Property	Details	5				
Property Number:						This numbe	er can be fo	ound on y	our Rate	Bill
Address of Property: (Please include your Eircode)										
	F		1	R		С	0	D		E
			Appli	cant Deta	nils					
Name of Applicant:										
Customer Number:										
Contact Telephone Number										
Email Address:										
Address of Applicant: (Please include your Eircode)										
	E			R		С	0	D		E
Period of vacancy being claims	d in this	applica	ntion (b	oth dates	inclus	sive) :				
Property Vacant From: Property Vacant To:	d d	d d	/	m m	m m	/	У	У	У	У
The property is/has been vacant because: (a) It has not been possible to find a suitable tenant at a reasonable rent. (complete Section 2) or (b) It has been necessary to carry out additions, alterations, or repairs. (complete Section 3)										
Section 2 (Please complete where vacancy is due to being unable to find a suitable tenant) Has the property been advertised for lease / rent? Yes No										
, , ,	20 101 100	.50 / 10		. 33	'`					
Auctioneer / Letting Agent:										
You must include supporti	ng doci	ımenta	tion si	ich as	an Δı	ıctioneer	's letter	. New	snaner	or Onli

Advertisements, or other proof of the premises being advertised to let for the entire period of vacancy claimed.

Costion 3 (Discossingly)	-facther and -factorite based and -table							
Section 3 (Please complete where vacancy i	s for the purpose of refurbishment, repairs, etc.)							
Please give a brief description of the work undertaken:								
Planning Reference (if applicable)								
Cost or estimated cost of work?	€							
You must include supporting documentation such as a contract for works, contractor's invoices, photographic evidence, and any other relevant documentation which details work undertaken.								
Section 4 Declaration (Disease complete	in full)							
Section 4 - Declaration (Please complete	eni ruii)							
I understand that Wexford County Council (hereinafter referred to as "the Council") is collecting and processing this information for the purposes of processing a vacant premises application in accordance with Section 14(1) of the Local Government Act 1946.								
I understand that any personal information volunteered will be treated with the highest standards of security and confidentiality, in accordance with the Data Protection Acts. I understand that I am entitled to have my personal data corrected if the Council holds inaccurate data or deleted if the Council does not have legitimate reason for retaining it. I understand that sometimes it is necessary for Wexford County Council to share the information provided with other relevant statutory bodies and other trusted third parties who provide technical support in accordance with appropriate data sharing confidentiality agreements.								
I declare that I am the owner, or an agent appropriately delegated to act on their behalf, of the above named property. I declare that the details furnished above are true, accurate, correct and complete to the best of my knowledge and belief, in that the premises were completely unoccupied during the period claimed. I undertake to notify Wexford County Council if there is a change of circumstance relating to these premises between now and December 31 st (if applicable).								
I declare that no use was made by me of any part of or annex to the premises which may be included in the same rating or valuation of the premises where repairs were being carried out, and were not being reserved by me for my own contingent use on a suitable season or occasion and that the premises were not held in a state of furnished or partly furnished readiness for my own eventual occupation (if applicable).								
Signature of Applicant :								
Date: d d	/ m m / y y y							

Requirements to claim a discharge of rates on vacant commercial premises

- The property must be vacant on the date of making the rate for the year in question
- The property must be available to let and the owner is bone fide unable to find a suitable tenant at a
 reasonable rent or the property must be vacant for the purpose of carrying out of additions, alterations or
 repairs

Please return completed form, along with relevant supporting documentation covering the entire period of the claim, to the Rates Department, Wexford County Council, County Hall, Carricklawn, Wexford, Co. Wexford, Y35 WY93.