

# APPLICATION FOR DISCRETIONARY RURAL RATE RELIEF

Please answer all questions **USING BLACK INK** and return to:

Business Rates PO Box 1761 Solihull B91 3RR

Name \_\_\_\_\_ Account reference \_\_\_\_\_

Trading Name \_\_\_\_\_ Property reference \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_ Rateable Value \_\_\_\_\_

Telephone Number \_\_\_\_\_ (You do not have to provide your telephone number  
But it may be useful if we need to contact you)

Type of Business      1 General Store            3 Public House     

                                 2 Post Office            4 Petrol filling station     

1 If General Store: Type of goods sold \_\_\_\_\_

2 If Post Office: Type of goods sold / services offered \_\_\_\_\_

3 If Public House: Type of goods sold \_\_\_\_\_

4 If Petrol Filling Station: What fuel do you sell \_\_\_\_\_

Approximately how long has your business been established? \_\_\_\_\_ If you run a shop, what are your opening hours? \_\_\_\_\_

Can the same products or services you offer, be bought anywhere else locally?      Yes      No

Is your business ancillary to any other business in the locality?      Yes      No

If yes, please give details. \_\_\_\_\_

\_\_\_\_\_

Approximately what percentage of your customers comes from the immediate locality? \_\_\_\_\_

Is your business convenient and easily accessible for the elderly and disabled                      Yes      No

If your business were to close, what would be the effect on the elderly and disabled in local area?

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How many people does your business employ? \_\_\_\_\_

How many of these live within the local area? \_\_\_\_\_

Does your business support local events or projects, e.g. the village fete/village hall?      Yes      No

If yes, please give examples \_\_\_\_\_

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I understand that in order to qualify for discretionary Rural Rate Relief it is necessary for the Council to be satisfied that the premises is used for purposes which are of benefit to the local community. The Council must be satisfied that it would be reasonable to grant this relief having regard to the interests of persons liable to pay the Council Tax. In order to do this, Solihull MBC may write to your local Parish Council asking whether they support your application. If you would like to supply any further information in support of your application please do so.

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*I agree to continue paying my business rate installments in full on the due dates, until I am advised that my application has been successful.*

*I declare that to the best of my knowledge and belief, all the information that I have given on this form is true and complete in all respects. I am willing for the Council to make any enquiries they wish to make sure the information is true. I undertake to notify the Council as soon as these circumstances change.*

*I understand that the information given on this form may be used in connection with other Council services. It may be matched against data held by this and other local authorities and any other grants and awards I may have applied for.*

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_