**FORM A: CASH CAP AND EXEMPTION THRESHOLD DECLARATION**

RATEPAYER NAME: _____

GROUP NAME (IF APPLICABLE): _____

PROPERTY ADDRESS:_____

BUSINESS RATES ACCOUNT NUMBER: _____

PROPERTY REFERENCE NUMBER: _____

The value of the 2025/26 Retail, Hospitality and Leisure Relief to be provided by Solihull MBC in respect of the above account/property is £_____ (as shown on your bill).

This award shall comply with the cash cap on claiming the 2025/26 Retail, Hospitality and Leisure Relief and the exemption threshold on the basis that, including this award, [name of ratepayer] (together with any other companies in the same Group) shall not receive more than £110,000 of the Retail, Hospitality and Leisure Relief Scheme for eligible properties within 2025/26 and shall not receive more than £315,000 in total of Minimal Financial Assistance over 3 years (including 2025/26). Find guidance on the cash cap and Minimal Financial Assistance limit.

Please list below all other properties for which you are receiving this discount (continue on a separate page if necessary):

| *Property ref. no.* | *Local authority providing subsidy* | *Value of RHL relief* |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

List of other subsidies (excluding RHL relief for 2025/26)

Value of other subsidies (2023/24 to 2025/26) | Property Reference No. | Local authority providing subsidy

_____

_____

_____

**I CONFIRM that I am the ratepayer named above (or authorised to sign on their behalf)** and that (together with any other companies in the same group) I/we shall not exceed the £110,000 cash cap limit for 2025/26 Retail, Hospitality and Leisure Relief Scheme or the Minimal Financial Assistance limit of £315,000 over 3 years (including 2025/26).

*(continued overleaf)*

**I understand that knowingly making a false declaration may constitute fraud as defined within the Fraud Act 2006.**

Name: _____

Capacity in which signing: _____

Business address: _____

Telephone: _____ Email address: _____

Signature: _____ Date: _____

**Please send your completed form to us at retaildiscount@solihull.gov.uk or to the address at the top of this letter.**