Application for reduction or remission of rates on the ground of hardship 

Section 49 of the Local Government Finance Act 1988 gives the council the discretion to reduce or remit the payment of rates where:

1. it is satisfied that the ratepayer would sustain hardship if it did not do so, and
2. it is reasonable for the council to do so having regard to the interests of local council tax payers

Upon receipt of your application, provided you have answered all of the questions and have attached the necessary documentary evidence, the application will be reviewed.

In August 1990 the Department of the Environment issued the following guidance on the circumstances in which relief might be offered to ratepayers, but the final decision is always entirely at the discretion of the Council.

1. Although Councils may adopt rules for the consideration of hardship cases, they should not adopt a blanket policy either to give or not to give relief; each case should be considered on its own merits;
2. Reduction or remission of rates on grounds of hardship should be the exception rather than the rule;
3. The test of ‘hardship’ need not be confined strictly to financial hardship; all relevant factors affecting the ability of a business to meet its liability for rates should be taken into account;
4. 75% of the cost of any reduction or remittance of rates can be offset against the Council’s payment into the national non-domestic rate pool; 25% must be borne locally and met from the Council’s General Fund [which is supported by income from its Council Tax];
5. The ‘interests’ of Council Taxpayers in any area may go wider than direct ‘financial’ interests. For example, where the employment prospects in the area would be worsened by a company going out of business, or the amenities of an area might be reduced by, for instance, the loss of the only shop in a village; and
6. Where the granting of relief would have an adverse effect on the financial interests of Council Taxpayers, the case for a reduction or remission of rates payable may still, on balance, outweigh the cost to Taxpayers.

In order that an informed decision may be reached, it is important that:

1. every question in this form is answered as fully as possible – if the question does not apply to you the please write “not applicable” in the space provided for your answer; and
2. documentary evidence of circumstances accompanies the completed form.

If you do not answer the questions or evidence is not provided, then your application may not be considered.

Section 1: property details

Account number (you will find this on the rate demand):

Ratepayer’s name:

Address of rated premises:

Correspondence address (if different):

Owner details:

Description of rated premises (you will find this on the rate demand):

Rateable value (you will find this on the rate demand):

Section 2: trading status

Is or was the business a:

sole trader  partnership  limited company

Full name(s) of the ratepayer(s) – if a partnership, list all partners:

Trading name of the business

Type of business

Is there another business similar to yours in the local community?

yes  no

If yes, please provide details:

Name:

Address:

Are you still trading?

yes  no

If no, give date trading ceased:

Date that all stock and equipment were removed from the premises:

Do you own the property?

yes  no

If yes, give date of purchase:

If leasehold, give date commenced:

Give date ended or due to end:

If lease has ended, how did it end? (for example, not renewed, repossessed)

How many employees are there in the business?

What is the potential reduction in employment prospects and the general amenities of the area if your business were to close?

If leased or rented, please give name and address of the landlord/agent:

Please give details of rent payable

£      per

Are you in arrears with the rent?

yes  no

If yes, state amount: £

You must supply documentary evidence of these arrears.

If you have a mortgage on the premises, state:

Amount of mortgage: £

Date granted:

Period of repayment: from       to

Monthly repayment:

Are you in arrears with the repayment?

yes  no

If yes, state amount: £

You must supply documentary evidence of these payments arrears.

Section 3: funding

Personal capital invested: £

Bank loan: £

Monthly repayment: £

Period of repayment: from       to

If you had more than one bank loan, please provide details on a separate sheet.

Private loan: £

Monthly repayment: £

Period of repayment: from       to

If you had more than one private loan, please provide details on a separate sheet.

Other investment or source of loan:  
Please provide full details, including repayments.

If any of these loans are still outstanding, you must supply documentary evidence.

Details of all debts owed by the business:

For example, gas, electricity, telephone, rent, VAT, suppliers. You must supply up-to-date documentary evidence of these debts.

A copy of audited accounts for the last two years must be enclosed with this form. Your application will not be processed without these accounts.

**For completion by sole traders or partners only:**

Details of your savings, cash and share holdings:

You must supply documentary evidence.

Marital status:

Your age:

Dependants (for example, children – please state age and circumstances):

Home address:

Is this address the marital home?  yes  no

If you own your home, when did you buy it?

Purchase price:

Current market value:

Do you own any other property?

yes  no

If yes, give details:

Please provide details of any health problems which have affected you or your partner’s ability to work:

Please completed an expenditure form for yourself and your partner.

Section 4: other information

What factors have affected your trade which have resulted in this application?

For what period do you wish this application to apply?

If you are still trading, do you intend to continue to trade?

yes  no

Any other information that you wish to draw to the attention of the panel?

Section 5: declaration

I confirm that all information given in this form is true to the best of my knowledge and belief. I understand if any information that I give is found to be inaccurate, my application will be disqualified with immediate effect.

Sign and print name:

Capacity in which signed:

Date:

Telephone number (daytime):

Email address:

**Return this form to:**

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North Somerset Council, Business Rates, PO Box 76, Town Hall, Weston-super-Mare, BS23 1YY