# **Application for National Non Domestic Rates Mandatory Charity Relief**



The form can be returned to **Freepost RTJY-BGGZ-EKZK, Rushcliffe Borough Council, Rushcliffe Arena, Rugby Road, West Bridgford, Nottingham, NG2 7YG**.

This form can also be returned by email to the following address [revenues@rushcliffe.gov.uk](mailto:revenues@rushcliffe.gov.uk).

Charities and community amateur sports clubs can apply for charitable rate relief of up to 80% if a property is used for charitable purposes.

If you are a charity shop you must be wholly or mainly selling donated goods in order to qualify for the rate relief.

If you are a registered charity we require your charity number. This can be found at [Charity Register](https://www.gov.uk/find-charity-information).

If you are a registered community amateur sports club (CASC) we would need to confirm this at the following [community amateur sports clubs](https://www.gov.uk/government/publications/community-amateur-sports-clubs-casc-registered-with-hmrc--2). If you are not listed please provide proof of your CASC status that is no older than 2 months.

If you believe you are a charity but are not registered you will need to confirm how you are recognised as a charity and provide up to date proof.

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| Name of applicant. |  |
| Billing number. |  |
| Property reference. |  |
| Address of the property for which relief is being claimed. |  |
| Please confirm your Charity Commission charity number, (if applicable). |  |
| Are you a registered community amateur sports club (CASC). |  |
| If you are not a registered charity or CASC please confirm on what grounds you are recognised as a charity? You must provide proof of this when returning the application. |  |
| If a charity shop please confirm the percentage of donated goods sold. |  |
| Please detail the main objectives and purposes of your organisation. |  |
| Please state the activities undertaken at the premises to which the application relates. |  |
| Are the premises used by any other occupiers for non-charitable purposes, if so who and for what purposes. |  |

If you wish to make an application for discretionary charity rate relief an application for this can be found on our website.

## **DECLARATION**

I hereby certify that the information given in this form is correct to the best of my knowledge and belief.

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| Name of ratepayer. |  |
| Company number, (if applicable). |  |
| Name of person completing form. |  |
| Capacity of person completing form. |  |
| Telephone number. |  |
| Email address. |  |