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| **VACANT PROPERTY GRANT ALLOWANCE SCHEME APPLICATION FORM 2022****Year Ending 31st December 2022** |

**TO BE COMPLETED BY APPLICANT**

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| **Applicant Details (IN BLOCK CAPITALS)**  |
| Owner/Occupier Name:  | Rate No: (as per Rates Demand) |  |
| Correspondence Address (incl. Eircode):  | LAID Number:  |  |
| VO Number: |  |
| Property Address (Incl. Eircode): |
| Tel No: |
| Email: |
| **VACANCY DECLARATION** |
| **Period of Vacancy (please tick which applies A or B)****(Vacant commercial properties for sale do not qualify)** |
| **A FULL** YEAR (please tick )  |
| **B PARTIAL** YEARFrom day of 2022 to day of 2022 (if occupied during year) |
| As the owner / occupier of this vacant commercial property, I make this solemn declaration for the satisfaction of Sligo County Council, conscientiously believing the same to be true and by virtue of the Statutory Declaration Act, 1938.  |
| Signature of Applicant: | Date:  |
| ***Declared before me by the Applicant who is known to me personally:*** |
| Signature of Witness\* | Date:  |
| \* (Peace Commissioner / Commissioner for Oaths/Solicitor)  |
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| **Applicant Checklist:** | **Yes** | **No** |
| The property was vacant on the Date of Making of the rate - 24th February 2022 |  |  |
| Proof that the property is / was available for letting e.g. Letting Agents letter or other advertisements, if applicable  |  |  |
| Proof that the property was vacant to allow for repairs, if applicable |  |  |
| Proof that the property is maintained to a level that would allow its use for commercial purposes i.e. Photographs showing external and internal images of the property. |  |  |
| Signed and Witnessed Vacancy Declaration |  |  |
| Applicable vacant property Payment |  |  |

Completed Forms with supporting documentation must be returned by email or post to:**Rates@sligococo.ie** **or Rates Department, Finance Section, Sligo County Council, County Hall, Riverside, Sligo, F91 Y763.****Please note that Incomplete applications will be returned.** |
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| **For Office Use Only:**  |
| Rates Due:  | % Allowance:  | 70% / 60% / 50%  |
| Full Year:  | Partial Year:  | Remarks:  |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rates Collector | Date:  |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Administrative Officer | Date: |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Head of Finance | Date: |