

CORK COUNTY COUNCIL

APPLICATION FOR REFUND OF RATES

Please complete the relevant sections, and return to ADMINISTRATIVE OFFICER, CORK COUNTY COUNCIL, RATES DEPT., COUNTY HALL, CORK together with documents in support of your application:

1.	Applicant:	Name: _____
		Address: _____

	Rate No.	Tax/Vat No.
		PPSN No.
2.	Location of Premises:	Townland: _____ Valuation: € _____
3.	Period of Vacancy:	From _____ day of _____ 20 _____ to _____ day of _____ 20 _____
4.	Reason for Vacancy:	(a) For the purpose of repairs, etc. Section A overleaf. (b) Unable to obtain a tenant. Section B overleaf. (Please delete Section which does not apply, and complete Section indicated.)
5.	Refund Claimed:	I apply for Refund of Rates amounting to € _____ paid by me on _____ day of _____ 20 _____ as per Receipt No. _____
6.	Statutory Declaration	I HEREBY DECLARE THAT: (Please delete Section not applicable) 1. I am the Owner of the premises, the subject of this Claim. 2. I have paid the rates for the period indicated at Section 3 above. 3. I am the person entitled to a Refund. 4. The premises became vacant on _____ day of _____ 20 _____ <u>and remained wholly empty and unoccupied</u> as shown at Section 3 above by reason of the fact that: (a) additions, alterations, or repairs, details of which are given in Section A overleaf were being executed thereto during the entire period. or (b) I was, bona fide, unable to obtain a suitable tenant therefore, in the case of the hereditament to which the Rent Restrictions Acts apply, at the maximum rent permitted under these Acts. Details of my efforts to obtain a tenant are given overleaf in Section B. or (c) I was unable to let this hereditament to which the Rent Restrictions Acts do not apply at a reasonable rent. Details of my efforts to obtain a tenant are given overleaf in Section B.

I make this solemn declaration for the satisfaction of the Cork County Council, conscientiously believing the same to be true and by virtue of the Statutory Declaration Act, 1938.

*Declared before me by the Applicant
who is known to me personally.*

SIGNATURE OF APPLICANT.

SIGNATURE OF PEACE COMMISSIONER.

DATE: _____

THE APPROPRIATE SECTION HEREUNDER MUST ALSO BE COMPLETED

SECTION A: Premises unoccupied for the Purpose of Additions, Alterations or Repairs.

Nature of the Additions, Alterations, or Repairs:	_____ _____ _____
Name of Contractor:	NAME: _____ ADDRESS: _____ _____
Period of Work:	Commenced on _____ 20____ Completed on _____ 20____
Work in Progress:	If not completed, state: Approximate date of completion: _____ day of _____ 20 ____ Details of steps taken to execute the work: _____ _____
Documents to be submitted with this Application:	1. If work done by contractor - Receipts for amount expended. 2. If work done by Direct Labour - Receipts for materials supplied. 3. If work done with the aid of a Reconstruction Grant, Grant Number must be given here: GRANT NO.: _____
(NOTE : DOCUMENTS WILL BE RETURNED ON REQUEST).	

SECTION B: Premises unoccupied due to Inability to Obtain a Tenant

Were the premises erected before or after the 7th May, 1941?	BEFORE/AFTER
Rents permitted under Rent Restrictions Acts: _____	
If premises are not controlled under Rent Restrictions Acts, state Rent at which they were last let: _____ _____	
State the rent sought in respect of the period during which premises were unoccupied: _____	
State the steps taken to obtain a suitable tenant: _____ _____	

Documents to be submitted with this Application:	The following documents, whichever are appropriate: 1. Press Advertisements 2. Letting Notices 3. Estate Agent's or Auctioneer's Certificate.
(NOTE : DOCUMENTS WILL BE RETURNED ON REQUEST).	