



APPLICATION FOR REFUND OF RATES ON VACANT PREMISES

PLEASE COMPLETE IN BLOCK LETTERS

Premises:

Rate Account No. /

Period of Vacancy being claimed From: / / To: / /

Floor Area & Description of premises:

Is vacancy on entire premises or part thereof: **Entire** **Part %**

Applicant Details:

Name:

Address:

Telephone No: **Email:**

Owner Name:

Address:

Telephone No: **Email:**

A - vacancy due to an inability to obtain a suitable tenant

Letting Agent Details	Date property placed with Letting Agent

Requires written confirmation of active marketing from Letting Agent

B- vacancy due to execution of alterations or repairs to premises

Name of Building Contractor:	Renovation Details	
	Commenced on	Completed on
Brief Description:		

Requires written confirmation of works undertaken and duration from Architect/Building Contractor

TO BE COMPLETED IF PREMISES ARE CURRENTLY OCCUPIED	
Name of Tenant:	
Address of Tenant:	
Date of occupancy:	
Tenant Contact Details: Tel No:	Email:

Statutory Declaration

I (BLOCK LETTERS) _____ residing at _____

being the owner/ applicant/agent for owner/agent for applicant do solemnly and sincerely declare that the premises, subject to this application, was unoccupied for the period stated and for the reason stated at A or B on page 1.

I therefore claim a refund or allowance of such proportion of the County Rate as the law on that behalf provides. And I make this solemn declaration for the satisfaction of Fingal County Council, conscientiously believing the same to be true and by virtue of the Statutory Declarations Acts 1938.

Signature of Applicant: _____

Declared by applicant (BLOCK LETTERS) _____ before me

Peace Commissioner or Solicitor (BLOCK LETTERS) _____

Signature _____ Date: ____/____/____

P.C./SOL STAMP

OFFICE USE ONLY:

I confirm that the application details are correct and the vacancy refund is appropriate for the period from ____/____/____ to ____/____/____

Rate Collector

Date