Tel no: (0118) 9746000



NNDR – INQUIRY FORM

Address of Property:
NATIONAL NON-DOMESTIC RATES
Please complete this form to help us check our Non-Domestic Rate records. If you have any difficulties in completing this form please contact a member of staff on the telephone numbers above for assistance. A quick reply will help the Council save money and ensure that you receive a correct bill. Please write clearly.
Section A. Please complete this section if the property is occupied
1. Full name of Occupier
Business Telephone No:
If the occupier is a Company / Partnership please confirm if you are a limited Company, and if not please give the names of the individuals trading as the Company / Partnership.
2. Date your lease / Ownership commenced
3. Date your Business commenced trading at this address
4. Address to which correspondence should be sent
5. (a) Your previous address
(b) If applicable, the date you vacated this property
6. Forwarding address of former occupier (if known)

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Section B. Please complete this section if the property is empty							
1.	•	Date	the	property	became	empty	
2.	. Name of the Company / Individual(s) entitled to possession of the property (i.e. the leaseholder / Owner)						
3.	Date Lease / Ownership com	menced					
4.	Address to which correspond	ence should be ser	nt				
5.	Forwarding address of forme	r occupier (if knov	vn)				
Section C. Please complete this section if the property is rented							
	Please give the name and add						
1.	Trouse give the name and add		d to whom fone	is para			
2.	Does your rent include a pay	yment for National	Non-Domestic	Rates	YES/NO		
Section D. To be completed in all cases							
Na	me of person completing this	enquiry form		Position	, if signing on behalf of a	company	
C:				Data			
518	gnature			Date			

Data Protection Statement. The information you have provided will be processed according to the Data Protection Act 1998. The information will be used for Non-Domestic Rates purposes and may be disclosed to organisations used by the Council to aid collection of the tax. The information may also be used in the prevention and detection of fraud and shared with other local authorities by data matching techniques.

PLEASE RETURN THE COMPLETED FORM TO: Wokingham Borough Council, P.O. Box 152, Shute End, Wokingham, RG40 1WJ.