



Non-Domestic Rating-Wales Proposal to alter the 2017 Rating List

This form should be returned to:

Valuation Officer
Non-domestic rates Wales
Wycliffe House
Green Lane
Durham
DH1 3UW

This form may be used to make an appeal to alter the valuation and other details of non-domestic property in Wales. Please read the Guidance Notes which give advice on completing the form (some questions display a corresponding Guidance Note number, shown in brackets next to the question). It is important that you enter enough information about the property to enable us to identify it correctly and to help satisfy legal requirements. If you do not answer all sections fully your form may not be accepted.

PART A - Details of the property/rating assessment:

This section refers to property details held by the Valuation Office Agency found online at www.gov.uk/voa. Please enter information relating to the property you wish to appeal. If more than one property is involved please use a separate sheet of paper to record the details and attach securely to this form.

1 Address of property this proposal relates to:

Post code

2 Description of the property this proposal relates to:

3 Name of current occupier:

4 Address of current occupier (if different to that shown in 1):

Post code

5 Rateable value (GN5):

£

6 Effective date (GN 6):

Day Month Year

7 If the property is owner occupied please tick:

If the property is **NOT** owner occupied please state the name of the owner:

8 Owner's address (if different from that shown in 1 and 4):

Post code

9 If this property is not owner occupied are rent or licence fees paid (GN 9)? Yes No

If "Yes" please state the current annual rent (GN 9):

£

Date this first became payable:

Day Month Year

Date this rent next due for review:

Day Month Year

10 Name of billing authority: (GN10)

11 Billing authority reference number: (GN11)

PART B What change you are proposing to the rating list/property valuation:

Please complete questions 12 A-G tick one box only (GN 12).

12 I propose that the rating list entry shown for the above property (and those on any attached sheet) should be altered as follows (Note - please tick the relevant box and supply additional information as necessary):

A The rateable value altered to £ with effect from Day Month Year

or B The existing entry to be deleted with effect from Day Month Year

or C The existing entry divided into (insert number), with effect from Day Month Year

or D The existing entries merged into entry(ies) (insert numbers), with effect from Day Month Year

or E The effective date changed to Day Month Year

or F Other changes (please specify) with effect from Day Month Year

or G I propose that the property identified in Part A should be shown as a new entry in the rating list at a rateable value of £ with effect from Day Month Year

PART C - Reasons for proposing changes to the rating list/property valuation:

13 Please tick the statements that apply. Detailed reasons for believing 13/01 or 13/04-13/11 are applicable should be given at question 14 below.

I have reason to believe the rating list is inaccurate and that the alteration proposed in PART B of the form should be made because:

- | | | | | | | | |
|--|----------------------------------|-------|------|------|-------|------|------|
| <input type="checkbox"/> 13/01 The rateable value was inaccurate when the property was revalued in April 2017. | GN
13 | | | | | | |
| or <input type="checkbox"/> 13/02 The rateable value is inaccurate because of an alteration made by the Valuation Officer. | (01) | | | | | | |
| or <input type="checkbox"/> 13/03 The effective date of the alteration made by the Valuation Officer on <table border="1" style="display: inline-table;"><tr><td>Day</td><td>Month</td><td>Year</td></tr></table> is inaccurate. | Day | Month | Year | (02) | | | |
| Day | Month | Year | | | | | |
| or <input type="checkbox"/> 13/04 Circumstances affecting the rateable value changed on <table border="1" style="display: inline-table;"><tr><td>Day</td><td>Month</td><td>Year</td></tr></table> | Day | Month | Year | (03) | | | |
| Day | Month | Year | | | | | |
| or <input type="checkbox"/> 13/05 The property has been demolished or no longer exists. | (04) | | | | | | |
| or <input type="checkbox"/> 13/06 The property is now domestic or exempt from rating. | (05) | | | | | | |
| or <input type="checkbox"/> 13/07 The entry shown in the list should be deleted for reasons other than those at 13/05 & 13/06. | (06) | | | | | | |
| or <input type="checkbox"/> 13/08 The property should be shown as more than one assessment. | (07) | | | | | | |
| or <input type="checkbox"/> 13/09 The properties should be shown as one or more different assessments. | (08) | | | | | | |
| or <input type="checkbox"/> 13/10 I consider the property to be rateable. | (09) | | | | | | |
| or <input type="checkbox"/> 13/11 The entry is wrong by reason of a decision of the <table border="1" style="display: inline-table;"><tr><td colspan="3">Insert name of Tribunal or Court</td></tr></table> *valuation tribunal or higher courts (*please indicate which), on <table border="1" style="display: inline-table;"><tr><td>Day</td><td>Month</td><td>Year</td></tr></table> | Insert name of Tribunal or Court | | | Day | Month | Year | (10) |
| Insert name of Tribunal or Court | | | | | | | |
| Day | Month | Year | | | | | |
| | (11) | | | | | | |

in respect of the following property (please give address with full post code):

This decision is relevant to the rating list entry for the property to which this proposal relates because:

The entry is wrong by reason of a decision of the _____ *tribunal/court

My reasons for believing the rating list entry to be wrong in light of the decision are:

or **13/12** A statement required to be made about the property is wrong or has been omitted. (12)

14 My detailed reasons for believing the property value or details should be altered are: (GN14)

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PART D - Details of the person completing this form:

15 Capacity in which this proposal is made:

- | | |
|--|--|
| <input type="checkbox"/> Occupier | <input type="checkbox"/> Agent for Occupier |
| <input type="checkbox"/> Owner | <input type="checkbox"/> Agent for Owner |
| <input type="checkbox"/> Owner/Occupier | <input type="checkbox"/> Agent for Owner/Occupier |
| <input type="checkbox"/> Billing authority | <input type="checkbox"/> Agent for billing authority |

Other capacity (please state):

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16 Name in CAPITAL LETTERS:

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17 Signed:

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Date:

Day	Month	Year
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18 Address for correspondence:

Post code

19 Daytime telephone number:

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20 Mobile phone (optional):

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21 If you wish to receive communications by email please give your full email address below:

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22 Your reference (if applicable):

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**A proposal to alter the rating list is a public document and may be inspected upon request.
7012 (2017)W 2/2017**