

Request for information

Non-Domestic Rating

For off	fice use only	

The Valuation Office is an Executive Agency of HM Revenue & Customs

Address:				
Reference nu	mber:			

Please enter the address and reference number exactly as shown on the original form or letter. If the address needs any corrections, please type these separately in the address box.

Time limit

You must return this form within 56 days from the day you receive it. If you do not return this form within 56 days you will be liable to a penalty of £100 [see paragraph 5A(1) of Schedule 9 to the Local Government Finance Act 1988 ("the Act")].

How to fill in this form

You may find it useful to have your lease or agreement to hand. Throughout this form:

- The property means the rating list entry shown in the address panel above
- where a date is requested please give the exact date if you know it. If you do not know the exact date, just fill in the month and year boxes.

This request for information is a notice sent to you pursuant to powers granted to the Valuation Officer under paragraph 5(1) of Schedule 9 of the act. You are required as the owner or occupier, to provide information regarding the property (see paragraph 5(2) of Schedule 9 of the Act. You may be prosecuted if you make false statements.

Why your information is important

The VOA uses the information provided by all businesses in England and Wales to set rateable values.

These are used by your local council to calculate your business rates bill.

Rateable values are based on the annual rent for a property as if it was available on the open market on a fixed date.

Providing this information helps us get the rateable value correct and ensures your local council can calculate accurate business rates for your business.

How to submit this form

Please save your completed PDF and send it as an email attachment to: specialist.rating@voa.gov.uk

Large Print

Large format print copies of this form are available on request from specialist.rating@voa.gov.uk

I believe that the information requested will assist me in carrying out functions conferred or imposed on me by or under part III of the Local Government Finance Act 1988 (concerning non-domestic rating), including compiling a new rating list or maintaining an existing rating list.

Valuation Officer

1	Name of the current network occupier or if unoccupied the owner:	Indicate your type of tenure, tick all that apply; (exclude items supplied to other parties included in question 4b and 4d)
	Occupier Owner if unoccupied	Freehold
		Own Build
		Capital Purchase
		Indefeasible Right of Use Agreement
2	Is the address shown on the front of the form correct?	Leasehold
	No Yes	Dark Fibre Agreement
		Fibre Swap Agreement
	If "No", state the correct full postal address below	Duct or Sub-Duct Agreement
		Infrastructure Agreement
		Wayleave
		Easement
		Tenancy
2 -	If different forces O who are worships the full address of	Licence
2 a.	If different from 2, please provide the full address of your head office, to which you require any correspondence or notices to be sent:	Other (please specify)
	6	Please provide details of any cables, fibres, ducts or sub-ducts you have installed for your own use, i.e. own build network (exclude network provided by others or returned at question 8 in Part B)
3	When did you first occupy or light the network?	a) Have you constructed your own network or parts of your network as owner/occupier?
	Day Month Year	No 🗆 Yes 🗔
4	a) What is the present use of the network? (e.g. capacity provider, fibre provider, network operator, service connection, other or any combination etc)	Total Route kilometres of own build:
	service connection, other or any combination etcy	
		b) Have you lit any of your own build fibres?
		No ☐ Yes ☐
		c) Total Route kilometres of own build lit fibre:
	b) Do you supply exclusive fibres, cables, ducts or	
	sub-ducts to any other parties? (exclusive fibres include; dark fibre agreements, Indefeasible Rights of Use Agreements, fibre swaps, capital sales etc. Do not	d) Average number of lit fibres per Route kilometre:
	include details of any capacity only agreements)	
	No Yes Yes	
	If 'Yes' please provide further details in Question 7.1	
	c) Do you occupy buildings or exclusive rooms or floors as part of your network?	
	No ☐ Yes ☐ If 'Yes' please provide further details Part C	
	d) Do you provide exclusive parts of your buildings, rooms or floors to any other parties?	
	No ☐ Yes ☐	
	If 'Yes' please provide further details in 7.2 (exclude any co-location space, which consists of rack space only or non-exclusive floor space in a shared room or floor)	

	provide details below for each o			r of separate sales, interests o st or exclusive use or right has	
	Total number No	one (go to question 7.2)			
Fire	st Interest		Se	econd Interest	
Ор	erator or third party: (Please con	mplete for each	Oı	perator or third party: (Please	complete for each
оре	erator or third party or attach a full o	copy of the agreement)	op	perator or third party or attach a	full copy of the agreeme
b)	Name:		b)	Name:	
:	State the correct full postal addre	ess below:		State the correct full postal a	ddress below:
	Details of agreement, sale, rig			Details of agreement, sale,	
;)	Type of agreement, right or inter	_	c)	Type of agreement, right or in	
	Dark Fibre Lease Sub-Duct Agreement	Duct Agreement Fibre Swap		Dark Fibre Lease Sub-Duct Agreement	Duct Agreement Fibre Swap
	Indefeasible Right of Use	Capital Sale		Indefeasible Right of Us	
		<u> </u>			<u> </u>
17	Date of agreement colo =	☐ Other (please specify)	۷/	Date of agreement, sale	Other (please sp
	Date of agreement, sale, right or interest:	Day Month Year	u)	Date of agreement, sale, right or interest:	Day Month Year
	Term in years or specify if a free	hold sale:	e)	Term in years or specify if a f	reehold sale:
		hold sale			reehold sale
	Location of fibres, cables, ducts complete for each section on a spaper if necessary)		f)	Location of fibres, cables, du complete for each section on paper if necessary)	
	Start location			Start location	
	End location			End location	
	Route kilometres]		Route kilometres	
	Number of: fibres	ducts		Number of: fibres	ducts
		i <u>—</u>			
	cables Payment details <i>(Please state if</i>	or sub-ducts	a)	cables Payment details (Please state	or sub-ducts
	UK pounds sterling)		9)	UK pounds sterling)	
	Annual Rental payments:	£		Annual Rental payments:	£
	Date of rept:	Day Month Year		Date of rent:	Day Month Ye
	Date of rent:	£		Date of rent:	£
	Capital payment:	Day Month Year		Capital payment:	Day Month Ye
	Date of payment			Date of payment	
ı)	Rent Reviews: Frequency	years	h)	Rent Reviews: Frequency	years
,	Basis: OMV	RPI	,	Basis: OMV	RPI
	Other (pleas	se specify)		Other (a	lease specify)
	W	,		()-	,

7.1 Details of fibres, cables, ducts, and sub-ducts provided to other parties (from Question 4b)

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7.2 Details of buildings, or part buildings provided to other parties (from Question 4d)

This section should be completed if the occupier or owner named in question 1 has sold, let or granted permission or any other right or interest, to any other person(s), for the exclusive use of any accommodation including buildings, floors, rooms or cabins. (Please exclude any accommodation that consists of shared rooms or rack space only). If there are a number, please continue on a separate sheet of paper or on a photocopy of this page and attach it to this return.

Total number None (go to Part B question 8	")
irst Interest	Second Interest
perator or third party: (Please complete for each perator or third party or attach a full copy of the agreement) Name of third party occupying accommodation:	Operator or third party: (Please complete for each operator or third party or attach a full copy of the agreement) b) Name of third party occupying accommodation:
State the correct full postal address below:	State the correct full postal address below:
Details of agreement, sale, right or interest: Location Address	Details of agreement, sale, right or interest: c) Location Address
Type of accommodation, please specify: Building Cabin Floor Room Land	d) Type of accommodation, please specify: Building Cabin Floor Room Land
Other (please specify)) Please specify the type of agreement and tenure of the third party: Lease Licence Freehold sale	e) Please specify the type of agreement and tenure of the third party: Lease Licence Freehold sale
Date of agreement, sale, right or interest: Other (please specify) Day Month Year	Date of agreement, sale, right or interest: Other (please special play Month Ye
Term in years or specify if a freehold sale: years Freehold sale	f) Term in years or specify if a freehold sale: years Freehold sale
Payment details (Please state if a currency other than UK pounds sterling) Annual Rental payments: Day Month Year Date of rent:	g) Payment details (Please state if a currency other than UK pounds sterling) Annual Rental payments: Day Month Year
Capital payment: Day Month Year Day Month Year	Capital payment: Day Month Year
) Rent Reviews: Frequency years Basis: OMV RPI RPI	h) Rent Reviews: Frequency years Basis: OMV RPI RPI
Other (please specify)	Other (please specify)

8 Details of fibres, cables, ducts and sub-ducts you occupy and fibres you light as part of your network

This section should be completed if the occupier or owner named in question 1 uses fibres, cables, ducts or sub-ducts or lights fibres that have been provided by other third parties and are used as part of your network. If there are a number of separate agreements, please continue on a separate sheet of paper or on a photocopy of this page and attach it to this return.

a) Please state the total number of separate agreements and provide details below for each one:	g) Payment details (Please state if a currency other than UK pounds sterling)
Total number None (go to question 9)	Annual Rental payments:
	Day Month Year Date of rent:
b) Landlord or third party: (Please complete for each landlord or third party)	c .
Name:	Capital payment: Day Month Year
State the correct full postal address below:	Date of payment
	h) Bart Bariana Farmana
	h) Rent Reviews: Frequency years Basis: OMV RPI
	Other (please specify)
Details of agreement	i) Repairs: Please state who is responsible for repairs:
c) Type of agreement, purchase, right or interest	
Dark Fibre Lease Duct Agreement	ls a separate charge made for repairs? No 🗌 Yes 🗆
Sub-Duct Agreement Fibre Swap	
Indefeasible Right of Use Capital Sale	
Other (please specify	<i>(</i>)
d) Date of agreement, sale,	
right or interest:	
e) Term in years	
Years	
f) Location of fibres, cables, ducts or sub-ducts	
(Please complete for each section on a separate piece of paper if necessary)	
Start location	
End location	
Route kilometres	
Number of:	
fibres	
cables	
ducts	
or sub-ducts	

Total fibre kilometres

Lit fibre kilometres

inc sha pap	is section should be completed if the occupier or owner nam luding buildings, floors, rooms or cabins as part of your netwared rooms or rack space for which you have overall control per or on a photocopy of this page and attach it to this return Please state the total number of separate locations and pro	work. Please include any accommodation that consists of . If there are a number, please continue on a separate sh n.	f
	Total number None		
Lo	cation 1	Location 2	
(Pleof to	twork accommodation ease complete for each location or attach a full copy the rental agreement if relevant) Details of the accommodation Location address:	Network accommodation (Please complete for each location or attach a full copy of the rental agreement if relevant) b) Details of the accommodation Location address:	
c)	Type of accommodation, please specify: Building Cabin Floor Room Land Other (please specify)	c) Type of accommodation, please specify: Building Cabin Floor Room Land Other (please	
	Please specify the type of agreement and tenure of the third party: Lease Licence Freehold sale	d) Please specify the type of agreement and tenure the third party: Lease Licence Freehold sale	of
	Date of agreement, sale, right or interest: Other (please specify) Day Month Year	e) Date of agreement, sale, right or interest: Other (please	spe Ye
f)	Term in years or specify if a freehold sale: years Freehold sale	f) Term in years or specify if a freehold sale: years Freehold sale	·
	Payment details (Please state if a currency other than UK pounds sterling) Annual Rental payments: Date of rent: Capital payment: Day Month Year Day Month Year	g) Payment details (Please state if a currency other UK pounds sterling) Annual Rental payments: Date of rent: Capital payment: Date of payment £ Day Month Day Month	Yea
h)	Rent Reviews: Frequency years Basis: OMV RPI Other (please specify)	h) Rent Reviews: Frequency years Basis: OMV RPI Other (please specify)	
i)	Repairs: Please state who is responsible for repairs:	i) Repairs: Please state who is responsible for repa	irs:
j)	Is a separate charge made for repairs? No Yes Shared accommodation: Do you provide shared accommodation or rack space to other parties at this location? No Yes If 'Yes', please provide the name(s) of the other party(s)	j) Shared accommodation: Do you provide shared accommodation or rack space to other parties at this location?	es es

Please complete the declaration on page 7 before you return this Notice to me.

PART D - Declaration COMPLETE IN ALL CASES

	correct and complete.
Signature	
Name in CAPITALS	
Date	Day Month Year
Position	
I am the Occu	pier Owner Lessee Occupier's Agent Owner's Agent Lessee's Agent
Daytime telephone no.	Email address
PART E - Con	tact Details
If you would like us please give details	to either contact you at a different address or contact someone else if we have any queries about this form, here.
Name in CAPITALS	
Daytime telephone no.	Email address
Correspondence address	
Lane, Durham	to: Valuation Office Agency, Durham Customer Service Centre, Wycliffe House, Green DH1 3UW or if completing digitally, save the PDF and return as an email attachment to ag@voa.gov.uk
We hold information	e is an Executive Agency of HM Revenue & Customs, which is a Data Controller under the Data Protection Act n for the purposes of taxes and certain other statutory functions as assigned by Parliament. The information we for any of the Valuation Office Agency's functions.
	ation about you from others, such as other government departments and agencies and local authorities. We tion we receive from them and also from you, with what is already in our records.
	nation to other government departments and agencies and local authorities but only if the law permits us to do curacy of information, to prevent or detect crime and to protect public funds.
Further infor	mation or remarks (if any)
	her details here if there is insufficient room for you to complete answers to any of the foregoing questions or if juire further explanation or clarification
Question No.	Details

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Further information or remarks (if any) Please provide further details here if there is insufficient room for you to complete answers to any of the foregoing questions or if any question(s) require further explanation or clarification Question No. Details

Please complete the declaration on Page 7 before you return this notice to me