

Change of Occupancy of Rateable Property

PART 1 - RELEVANT PROPERTY DETAILS

'' denotes a mandatory field*

* Valuation Office Property ID Number:

or

* Rate Number(s): *

*Address of Property:

DED:
 Townland:
 Lot No:

PART 2 - NATURE OF TRANSACTION (please tick one of the boxes below)

Note:- Parts 1,2,3,4 and 10 of the form to be completed in all cases
 Parts 5, 6, 7, 8, 9 to be completed based on the Nature of the Transaction

* **Type:**

Sale:	<input type="checkbox"/>	Please complete Parts 3, 4 and <u>5</u>
Lease:	<input type="checkbox"/>	Please complete Parts 3, 4 and <u>6</u>
Sublet:	<input type="checkbox"/>	Please complete Parts 3, 4 and <u>6</u>
Licence:	<input type="checkbox"/>	Please complete Parts 3, 4 and <u>6</u>
Receivership:	<input type="checkbox"/>	Please complete Parts 3, 4 and <u>7</u>
Liquidation:	<input type="checkbox"/>	Please complete Parts 3, 4 and <u>7</u>
Other (Please State):	<input type="checkbox"/>	Please complete Parts 3, 4 and 8 <i>or</i> 9

* Date of Transaction: / / (dd/mm/yyyy)

If Lease/Sublet/Licence:

* Period from: / / (dd/mm/yyyy)
 * Period To: / / (dd/mm/yyyy)

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PART 3 - CURRENT OWNER DETAILS

(Prior to the date of transaction (Vendor/Lessor) and person submitting the notice of assignment)

* Legal Name:

* Trading Name:
(If different from Legal Name)

*Correspondence Address:
(if different from address of property (Part1))

* Company Registered No:

* Telephone:

* Mobile:

* Email:

* Contact Name:

* Position:

PART 4 - CURRENT OCCUPIER'S DETAILS, ONLY IF DIFFERENT TO PART 3

(Prior to the date of transaction)

* Legal Name:

* Trading Name:
(If different from Legal Name)

* Correspondence Address:
(If different from address of property (Part1))

*Company Registered No:

* Telephone:

* Mobile:

* Email:

* Contact Name:

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* Position:

* Period of Occupation:

* Date of Commencement

* Date of Departure

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*Forwarding Address:

PART 5 - NEW OWNER DETAILS (IF PROPERTY SOLD)

* **Type:**

(Tick appropriate Box)

Owner

Occupier

Both

* Legal Name:

* Trading Name:

(If different from Legal Name)

Correspondence Address:

(If different from address of property (Part1))

* Company Registered No:

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* Telephone:

* Mobile:

* Email:

* Contact Name:

* Position:

PART 6 - NEW OCCUPIER DETAILS

* Legal Name:

* Trading Name:

(If different from Legal Name)

* Correspondence Address:

(If different from address of

Change of Occupancy of Rateable Property

property (Part1)

* Company Registered No:

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* Telephone:

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* Mobile:

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* Email:

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* Date of Lease:

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 dd/mm/yyyy

* Contact Name:

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* Position:

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PART 7 - RECEIVER/LIQUIDATOR DETAILS

* Legal Name:

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* Trading Name:

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(If different from Legal Name)

(Correspondence Address:

* Telephone:

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* Mobile:

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* Email:

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* Date of Appointment:

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 dd/mm/yyyy

* Contact Name:

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* Position:

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PART 8 - PREMISES BECOME VACANT

* Date Occupier left Premises:

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 dd/mm/yyyy

* Premises being advertised for Lease / Let:

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 Y/N

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or

* Other:

(Supporting documentation to be attached)

* Auctioneer / Letting Agent:

PART 9 - PREMISES CLOSED FOR REDEVELOPMENT / MAJOR OVERHAUL

* Date Premises Closed:

dd/mm/yyyy

* Planning Application Reference
Number (if applicable):

* Planned Date of Completion:

dd/mm/yyyy

PART 10 - DECLARATION

I declare that the details furnished above are true, accurate, correct and complete to the best of my knowledge and belief and I undertake to inform you of any necessary changes therein immediately in the event that I become aware of any matter which would alter this belief

I understand that I am obligated by law to pay all rates that I am liable for at the date of transfer of the property

Signed:

Print Name:

Date:

dd/mm/yyyy

Please return completed and signed form by Post to:

South Dublin County Council
Rates Section
County Hall
Tallaght
D24 A3XC

Or by email at:

ratesdept@sdblincoco.ie