



Non Domestic Rates Application for Extended Empty Property Relief

ACCOUNT REF NO:

NAME & ADDRESS:

Argyll & Bute Council
Financial Services
Kintyre House
Snipefield Industrial Estate
Campbeltown
PA28 6SY

Tel: 01586 555249

E-mail: ndr@argyll-bute.gov.uk

Date:

Dear Ratepayer

From 8th May 2025, Empty Property Relief may be extended for property owners who are actively working to bring their properties back into use. Owners may apply for **100% relief for up to 12 months at any time after the property becomes vacant**, provided the following conditions are met:

- Planning and building consents are secured.
- A detailed renovation schedule is submitted.
- Photographic evidence confirms works have commenced.
- The Council's Empty Business Property Officer is granted access for inspections.
- The cumulative rateable value of all properties under the same ownership does not exceed £1,000,000.

This form enables you to apply for this relief. Please complete all questions on the form, include the required documentary evidence, and return it to the address above.

If you need any help or assistance in completing the form, please phone 01586 555249 or e-mail ndr@argyll-bute.gov.uk.

Yours faithfully

A handwritten signature in black ink, appearing to read 'Fergus Walker'.

Fergus Walker
Revenues and Benefits Manager

EMPTY PROPERTY RELIEF APPLICATION

1. THE RATEPAYER

Full name / the name of the organisation / company claiming relief:

Legal Structure of the Ratepayer (Please put an 'X' in the relevant box) –

Individual	<input type="checkbox"/>	Private Limited Company (LTD)	<input type="checkbox"/>
Sole Trader	<input type="checkbox"/>	Public Limited Company (PLC)	<input type="checkbox"/>
Partnership	<input type="checkbox"/>	Limited Liability Partnership (LLP)	<input type="checkbox"/>
Charitable Organisation	<input type="checkbox"/>	Other (Please state)	<input type="text"/>

IF APPLICABLE, Companies House Registration number or Charity Registration number:
(Company number eg: 03493961)

2. THE PROPERTY

Subject Address:

Rates Reference Number:

Relief Period Claimed: (Relief can only be claimed from 08th May 2025)

FROM:

/ /

 TO:

/ /

Description of major repair works or structural alterations:

3. WORKS AND EVIDENCE

All applications **must** be supported by the relevant documentary evidence.

Please confirm that the following are included with your application:

- ☐ Copy of Building Warrant and Completion Certificate
- ☐ Detailed Renovation Schedule (See question 5)
- ☐ Letter from Contractors confirming works start date and expected completion date **OR** if works are self-managed, copies of receipts/invoices for purchased materials
- ☐ Photographic evidence of ongoing works (interior and/or exterior)

4. PROPERTY INSPECTION

Do you grant permission for the Council's Empty Business Property Officer to inspect the property?

Yes ☐

No ☐

I confirm that inspection of the property can be arranged by contacting:

Name:	
Address:	
Telephone Number:	
Email address:	

5. RENOVATION SCHEDULE

Start Date	Works to be Carried Out	End Date

(Continue on a separate sheet if necessary)

6. CERTIFICATION

Please read this declaration carefully before you sign and date it.

- I am duly authorised by the Ratepayer to make the application.
- I declare that the information given on this form is correct and complete to the best of my knowledge.
- I authorise the Council to make any necessary enquiries to check the information.
- I authorise the Council to cross check the information with other Councils in Scotland.
- I undertake to advise the Council of any change of circumstances, including the occupation / vacation of any other property I may occupy in Scotland which may affect liability for Non-Domestic Rates Relief.
- I understand that if I give information that is incorrect or incomplete or fail to report changes in circumstances, I (or the Ratepayer I represent) may be prosecuted.
- I understand that the Council will reclaim any incorrectly awarded Non-Domestic Rates Relief.
- I claim the above relief from non-domestic rates liability.

Applicant Name:

Telephone No:

Capacity: (e.g. Owner; Tenant; Agent; Employee)

E-mail Address:

Contact Address:

Your

Signature:

Date:

IMPORTANT INFORMATION

Please note that failure to provide all required information, including **contact details**, may result in the refusal of the application.

SUBMISSION

Please return this completed review form to either:

- **Email:** ndr@argyll-bute.gov.uk
- **Post:** Argyll & Bute Council, Non-Domestic Rates Section, Kintyre House, Snipefield Industrial Estate, Campbeltown, PA28 6SY