

**Donegal County Council**

**Commercial Rates Incentive Scheme Application Form**

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| **Applicant Details** |
| Name of applicant/Company Name (if applicable): |  |
| Contact Person: |  |
| Address: |  |
| Eircode: |  |
| Contact Telephone Number: |  |
| Contact Email Address: |  |
| List any other commercial properties currently or previously occupied by the applicant in County Donegal |  |

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| **Property Details** |
| Address of property: |  |
| Date property became vacant: |  |
| Is the property owned or leased by the applicant? If leased, state length of lease?\***Please provide evidence of occupation/lease.****\***Lease must be for a period greater than 12 months |  |
| Name and address of owner of property (if not owned by applicant): |  |
| Valuation Office ID (if known): |  |

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| **Proposed Use of the Property – Provide Details** |
| What is the proposed use for the property? Note: a **full** description of the type of business must be provided; stating ‘Retail Outlet/Shop’ would not be sufficient. You should describe your business activities clearly and accurately. |  |
| Are all consents/permissions in place for the proposed use? (Please provide planning reference numbers where known)  |  |
| Date trading is expected to commence: |  |
| **Financial Details** |
| Does the applicant have any outstanding local authority charges relating to any properties previously occupied by the applicant in County Donegal? |  |

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| Are there any outstanding local authority charges relating to the current property?  |  |
| State PPSN/VAT Registration Number of Applicant:Please also confirm your Tax Clearance Access (TCAN) number\*\*Successful applicants must be fully tax compliant |  |
| **Change of Ownership/Occupation (Section 32 Obligations)** |
| Have Section 32 obligations been satisfied?Please provide copy of form notifying change of occupier/owner (if applicable) Note: Owners/occupiers of relevant property have a legal obligation under Section 32 of The Local Government Reform Act 2014 to notify Donegal County Council if relevant property is being vacated, sold, or otherwise transferred. The Section 32 form is available to download on our website.[www.donegalcoco.ie](http://www.donegalcoco.ie) Please contact the Council for further details if you require further details in relation to the legal obligations. |  |

**Local Enterprise Office (LEO) Donegal**

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Have you made contact with the Donegal Local Enterprise Office?

Are you aware that the Local Enterprise Office (LEO) is the first point of contact for anyone in business or thinking about starting a business in Donegal? The Local Enterprise Office provides a range of services including business advice, training and management development programmes, sector initiatives, access to Enterprise Europe Network (EEN), mentoring, and grant-aid to eligible projects employing up to 10 persons.

The contact details for Donegal Local Enterprise Office are as follows:

Phone: 074 9160735

Lo Call: 1890 607000

Email: info@leo.donegalcoco.ie

Address: Donegal Local Enterprise Office

 Enterprise Fund Business Centre

 Ballyraine

 Letterkenny

 Co. Donegal

 F92 HP64

**Your Local Enterprise Office can advise you on grant/financial assistance, business advice, and development programmes, amongst other things. Please indicate if you consent to being contacted by your Local Enterprise Office?**

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**DISCLOSURE OF INFORMATION – FREEDOM OF INFORMATION ACT**

Donegal County Council wishes to advise applicants that, under the Freedom of Information Acts 2014, the information supplied in the application form may be made available on request, subject to Donegal County Council’s obligations under law.

You are asked to consider if any of the information supplied by you in this application should not be disclosed because of sensitivity. If this is the case you should, when providing the information, identify same and specify the reasons for its sensitivity. Donegal County Council will consult with you about sensitive information before making a decision on any Freedom of Information request received.

However, if you consider that none of the information supplied by you is sensitive, please complete the statement below to that effect. Such information may be released in response to a Freedom of Information request.

**Name of Applicant (in block capitals):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby agrees that none of the information supplied is sensitive, and any, or all, of the information supplied, may be released in response to a Freedom of Information request.

**Signed:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company name (if applicable):** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Declarations**

I/We declare that:

I/We have read and understood the Guidance Document “Donegal County Council, Commercial Rates Incentive Scheme” and confirm that I/We comply with the eligibility criteria and conditions therein.

The information provided in this application is truthful and accurate and this property has not been open for trade in the two years preceding this application.

**Signed (by Applicant):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Donegal County Council reserves the right to seek any other further information in support of this application. This form should be completed in advance of commencing a business in County Donegal and submitted with all required backup documentation to:

Ms Eimear Mc Dermott

Income Collection Unit

Donegal County Council

County House

Lifford

Co. Donegal

F93 Y622

Fully completed and signed applications may also be scanned and emailed to ratesincentive@donegalcoco.ie

**For Office Use Only**

Property/Account No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Amount of Rates due for 2020: €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rateable Valuation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Checklist:**







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| --- | --- | --- |
| **Year** | **Total Rates Due €** | **Grant %** |
| Year 1 |  | 75% |
| Year 2 |  | 50% |
| Year 3 |  | 25% |

**Date application received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Further Information sought: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Further Information received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant Amount Year 1 €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant Amount Year 2 €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant Amount Year 3 €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**