

OCCUPATION FORM

To be completed when you move into a Business Property and returned to:
Hartlepool Borough Council, Revenues Section, Civic Centre, Hartlepool, TS24 8AY

PROPERTY

Address: _____
_____ (office use: PRN _____)

ABOUT YOU

A – to be completed if you are a Company:

Company Name: _____ Company No: _____

Registered Office: _____

Trading Name (if different): _____ Nature of Business: _____

Director: Title _____ First Name: _____ Surname: _____

Residential Address: _____

Director: Title _____ First Name: _____ Surname: _____

Residential Address: _____

B – to be completed if you are a Sole Trader or Partnership:

Trading Name (if applicable): _____ Nature of Business: _____

Title _____ First Name: _____ Surname: _____

Residential Address: _____

Title _____ First Name: _____ Surname: _____

Residential Address: _____

ABOUT THE PROPERTY

Have you purchased or leased the property? (please state): _____

Date of Purchase or Lease: _____ Date Commenced Trading (if different): _____

Name of Owner/Landlord: _____ Tel No: _____

DECLARATION

Print Name: _____ Contact Telephone No: _____

Capacity in which you sign: _____

Signature: _____ Date: _____