

VACATION FORM

To be completed when you move out of 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): _____ Rate Acc Number: _____

Contact details for future correspondence / refund:

Name: _____ Telephone Number: _____

Address: _____

Has the Company ceased trading? YES / NO Liquidator details (if applicable):
_____ Tel No: _____

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

Trading Name (if applicable): _____ Rate Acc Number: _____

Contact details for future correspondence / refund:

Name: _____ Telephone Number: _____

Address: _____

ABOUT THE PROPERTY

Do you own or lease the property? (please delete): OWN LEASE

Date sold or lease ended (if applicable): _____ Date of Vacation: _____

Name of Owner/Landlord: _____ Tel No: _____

DECLARATION

Print Name: _____ Contact Telephone No: _____

Capacity in which you sign: _____

Signature: _____ Date: _____