



I hereby certify that the particulars given are correct to the best of my knowledge and belief.

Signature	Address
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Capacity in which signed	Date
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**NOTES**

Please ensure that a copy of the last set of audited accounts are sent with the application.

This form when completed should be returned to:-

Revenues Department  
East Hampshire District Council  
Penns Place  
Petersfield  
Hants  
GU31 4EX

If you have any queries regarding this form please telephone 01730 266551 and ask for business rates or email [revenues@easthants.gov.uk](mailto:revenues@easthants.gov.uk)