



**National Non Domestic Rate(Business Rates)
Change of Address Form**

Address of Property You are Leaving

Address:	
Town:	
County:	
Post Code:	

Is this address within South Norfolk?

Yes No

Name of Ratepayer: (Include all partners)	
Trading Name:	

What date was the stock removed from the property?	
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Details concerning the property you have vacated.

Did you own or rent/lease this property?

Owned	Yes	No
Rented/leased	Yes	No

If rented on what date does the rent/lease agreement finish?	
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If rented give name and address of landlord

Name:	
Address:	
Town:	
County:	
Post Code:	
Telephone number:	

If owned but has subsequently been sold please confirm date of sale and name and address of new owner.

Date of sale:	
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Name:	
Address:	
Town:	
County:	
Post Code:	
Telephone number:	

Address of Your New Property

Address:	
Town:	
County:	
Post Code:	

Address you would like correspondence sent to if different from above.

Address:	
Town:	
County:	
Post Code:	

What date was stock put into the new property?	
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Do you own or rent/lease this new property?

Owned	Yes	No
Rented	Yes	No

If rented what date did the rent/lease agreement start?	
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If new property rented give name and address of landlord

Name:	
Address:	
Town:	
County:	
Post Code:	
Telephone number:	

If owned please confirm date of purchase.

Date of purchase	
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Use this space for any additional information :

Information Provided by:	
Contact telephone number:	
E-mail address:	
Date:	