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| Section 32 - Local Government Reform Act 2014  **SECTION 11 – LOCAL GOVERNMENT RATES AND OTHER MATTERS ACT 2019** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PART 1 - RELEVANT PROPERTY DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 2 - NATURE OF TRANSACTION (please tick one of the boxes below)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***Note:-*** | *Parts 1,2,3,4 and 10 of the form to be completed in all cases* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *Parts 5, 6, 7, 8, 9 to be completed based on the Nature of the Transaction* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Sale: |  |  | | | Please complete Parts 3, 4 and 5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lease: |  |  | | | Please complete Parts 3, 4 and 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sublet: |  |  | | | Please complete Parts 3, 4 and 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Licence: |  |  | | | Please complete Parts 3, 4 and 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Receivership: | |  | | | Please complete Parts 3, 4 and 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Liquidation: | |  | | | Please complete Parts 3, 4 and 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other (Please State): | |  | | | Please complete Parts 3, 4 and 8 *or* 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 1 - RELEVANT PROPERTY DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *'****\*****' denotes a mandatory field* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 2 - NATURE OF TRANSACTION (please tick one of the boxes below)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***Note:-*** | *Parts 1,2,3,4 and 10 of the form to be completed in all cases* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *Parts 5, 6, 7, 8, 9 to be completed based on the Nature of the Transaction* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Sale: |  |  | | | Please complete Parts 3, 4 and 5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lease: |  |  | | | Please complete Parts 3, 4 and 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Receivership: | |  | | | Please complete Parts 3, 4 and 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Liquidation: | |  | | | Please complete Parts 3, 4 and 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other (Please State): | |  | | | Please complete Parts 3, 4 and 8 *or* 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 3 - CURRENT OWNER DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(Prior to the date of transaction (Vendor/Lessor) and person submitting the notice of assignment)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 4 - CURRENT OCCUPIER'S DETAILS, ONLY IF DIFFERENT TO PART 3** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(Prior to the date of transaction)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| (If different from address of property (Part1) | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 6 - NEW OCCUPIER DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 7 -RECEIVER/LIQUIDATOR DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 8 - PREMISES BECOME VACANT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| \* Other: |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | (Supporting documentation to be attached) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| \* Details of Auctioneer / Letting Agent: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PART 9 - PREMISES CLOSED FOR REDEVELOPMENT / MAJOR OVERHAUL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| \* Date Premises Closed: | | | | | | | |  | |  | | | / | |  | | | |  | | | / |  | |  | |  | | |  | dd/mm/yyyy | | | | | | | | | | | | | | | | | | |  |  |
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| \* Planning Application Reference Number (if applicable): | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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| \* Estimated Date of Completion: | | | | | | | |  | |  | | / | | | |  | | | |  | | / | |  | |  | |  | |  | dd/mm/yyyy | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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| **PART 10 - DECLARATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| I hereby declare and affirm that I am the owner of the above specified property and the person required to notify the Local Authority in accordance with the provisions of Section 11 of the Local Government Rates & Other Matters Act 2019.  I declare that the details furnished above are true, accurate, correct and complete to the best of my knowledge and belief and I undertake to inform you of any necessary changes therein immediately in the event that I become aware of any matter which would alter this belief.  I understand that I am obligated by law to pay all rates that I am liable for at the date of transfer of the property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Please return completed and signed form to the address below:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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| Commercial Rates Department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Waterford City & County Council | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Civic Offices- Dungarvan, Co.Waterford | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Waterford City & County Council | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City Hall, The Mall, Waterford | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |