



WORKING IN PARTNERSHIP

**HORSHAM AND MID  
SUSSEX  
DISTRICT COUNCILS  
WORKING  
IN PARTNERSHIP**



**Horsham  
District  
Council**

01403 215555

www.horsham.gov.uk



01444 477564

www.midsussex.gov.uk

revenue@midsussex.gov.uk

CenSus Revenues  
and Benefits  
Services  
PO Box 10607  
Nottingham  
NG6 6DU

**Horsham District Council - Charity / Non-Profit Making Organisation / Community  
Amateur Sports Club Relief Application**

Application by a **Charity, Non-Profit Making Organisation or Community Amateur Sports Club (CASC)**  
under (section 43 (5)(6) & 45(5)(6) or a **Non-Profit making or Organisation** claiming under Sections under  
47 of the Local Government Finance Act 1988

**Property Reference No:** ..... **Account No:** .....  
**Name of Charity/Organisation:** .....  
**Property Address:** .....

**PARTICULARS IN SUPPORT OF CLAIM**

**1. Particulars of the Charity or Organisation.**

- a) Is it registered with the Charity Commission **Yes/No**  
If yes, please state registration number.....
- b) Is it registered as a Community Amateur Sports Club (CASC)? **Yes/No**  
If yes, please state registration number.....
- c) If exempt from registration, please state on what grounds.....

**2. Details of property for which relief is claimed.**

- a) Is the premises operated by a trading arm of a Charity **Yes/No**

If yes, please give details.....

- a) Purpose/s for which property is used.....

**3. Section/s under which relief is being claimed.**

- a) Section 43(5)(6), 45(5)(6) **Yes/No**
- b) Section 47 Discretionary Relief **Yes/No**

**I HEREBY CERTIFY that the particulars given above are correct to the best of my knowledge and belief.**

Signed: ..... Name (in block capitals).....  
(Title : Mr/Mrs/Ms)

Date: ..... Capacity in which signed: .....

Telephone Number: ..... E-Mail Address.....

Address for correspondence if not as above: .....

**Note:** In cases where the application is being made in respect of a non-profit making organisation, the following documentation and information must also be forwarded with the application:-

- 1) Copy of the Memorandum and Articles of Association, or Rules of the Association. (These will be returned after the application has been considered, if requested).
- 2) Copies of the most recent audited accounts and balance sheets (see additional information sheet)
- 3) Membership numbers, including juniors and students, and how many reside within the Horsham District.

**Name of Charity/Organisation:**

**Property Reference:**

**Account Number:**

**ORGANISATIONS WITH MEMBERSHIP, PLEASE COMPLETE THE FOLLOWING:**

Total number of Members.....

Percentage who live in the Horsham District.....

Is there a membership fee? **Yes/No** If YES: how much £..... per annum/per month Are there any discounts, e.g. for unemployed, low waged?.....

Is there any criteria for membership (age, interests etc)? .....

How are members recruited (any specially targeted groups) .....

Is this a Registered Community Amateur Sports Club (CASC)? **Yes/No**

If yes is it: a) open to the whole community **Yes/No**

b) organised on an amateur basis **Yes/No**

Do you pay any players **Yes/No**

If YES give details of amounts paid.....

**ALL ORGANISATIONS PLEASE COMPLETE:**

What is the main source of income? .....

**Ownership of premises / funding**

Please give details of how built/purchased/lease funded.....

Details of how any rent is paid, by organisation or other body.....

Level of rent.....

**In relation to the facilities**

What is the nature of the facility (i.e hall, room etc).....

The size / capacity of the facility..... If it is an organisation with members, are the facilities available to non-members

**Yes/No**

If YES: on what basis? .....

If NO: why not? .....

Does the organisation run a bar or gaming machines

**Yes/No**

If **YES**: Give details of income from these sources.....

What is the status of the organisations finances? .....

**PLEASE NOTE** It is unlikely that an application for Discretionary Rate Relief will be successful where the accounts of that organisation, or an organisation to which it is affiliated, reveal surpluses of income over expenditure or substantial general reserves in excess of one year's operating costs that are not set against a specific project to be spent over the next three years

Does your Organisation have links directly or indirectly to another organisation operating for the same or different purpose? If so, details should be provided of the nature of the link and that organisation's assets and accounts

---

Give a brief explanation of why you consider your organisation should be granted discretionary rate relief:

### **DETERMINING AWARDS**

The Determination of awards is delegated to the responsible Cabinet Member. In determining awards, the Cabinet Member will bear in mind all the facts of each case, in particular the extent to which the organisation meets local needs in the district and benefits local people.

Please complete the section overleaf giving a summary of your most recent audited accounts. Forms and supporting documentation **MUST** be returned to the Council by 30 April

***If the form is not completed, it will be returned to you for this to be done before the matter can proceed.***

### SUMMARY OF EXPENDITURE AND INCOME OF YOUR LOCAL ORGANISATION

YEAR ENDED      /      /

Expenditure	£	Income	£	Notes to Accounts:
<b>Total</b>		<b>Total</b>		Balances at      /      /      £  (Net Current Assets):

CHECK LIST:                      Have you included the following:

- **The completed application form**
- **Copies of the most recent audited accounts and balance sheets for the local organisation**   
(accounts should be relevant to the premises occupied and not the national body accounts).
- Please complete all boxes on all forms, including N/A (not applicable), if appropriate.

**HOW WE USE YOUR INFORMATION.** We may use the information provided on this form to prevent and detect crime, and may also share this information with other public bodies for similar purposes. In addition we may use this information to promote other council services you may be entitled to, but we will not share this information with third parties for marketing purposes. Information on this form will be made available to the public. If there is a particular reason why you think we should not do so you can let us know by writing to CenSus Revenues and Benefits Services, PO Box 10607, Nottingham, NG6 6DU