

COVID-19 RATES CONCESSION/GRANT COMMERCIAL BUSINESS AND PROPERTY OWNERS

SECTION 1

- 1.** Do you own a commercial property in Katherine and operate your commercial business from it?
- 2.** Has your business been assessed as eligible for the JobKeeper program / Business Hardship Package

Go to section 2 once you have ticked the relevant section that apply to you.

SECTION 2

Tick one of the following benefit options - Select one (1) only

- Waiver of rates for one (1) installment of rates for 2019-20 **OR**
- Grant reimbursement of one (1) installment of paid rates for 2019-20 **OR**
- Waiver of one (1) installment of rates for 2020-21 and a deferment to pay rates until 1 January 2021***

How to claim

- 3.** Provide a copy of the tenants Hardship Certificate issued by the Department of Trade, Business and Innovation
- 4.** Provide the following contact details

Name: _____

Email: _____

Business Property Address: _____ Assessment #: _____

Postal Address: _____

Phone: _____ Mobile: _____

Supported by Department of Local Government, Housing and Community Development.

Privacy Statement

The information requested by this form is being collected by the Council for the purpose of a sign application and amongst other things, providing appropriate services to ratepayers, carrying out the Council's functions, and in some cases, for compiling and reporting statistics. If you do not provide the information Council may not be able to process your application. The Council may disclose the information provided by you on this form to other government bodies, as required or authorised by By-Law 86, or in accordance with our Privacy Policy, which is available on our website www.katherine.nt.gov.au or on request from the Council office. You may obtain access to your personal information held by Council by submitting an application form that is available at Council or by contacting the Customer Services Officer on 08 8972 5500.

STATUTORY DECLARATION

I/We, _____
solemnly and sincerely declare that I am / we are the landlord/s of the following address

_____ and lease the premises to the following business from that address

Business ABN _____

Business Name _____

And that:

That business has been granted a Business Hardship Certificate by the Department of Trade, Business and Innovation

The Value of rates charged against this business for 2019-2020 was \$ _____

I/We make application to the Katherine Town Council to:

- Waiver rates for one (1) installment of rates for 2019-20, **OR**
- Grant reimbursement of one (1) installment of paid rates for 2019-20 on the undertaking to reimburse the tenant for the same amount, **OR**
- Waiver of one (1) installment of rates for 2020-21 and a deferment to pay rates until 1 January 2021

This declaration is true, and I/We know it is an offence to make a statutory declaration knowing it is false in a material particular.

Declared at _____ the _____ day of _____ 20

Signature

Witnessed by: _____

Signature and name of person before whom the declaration is made

Address and telephone number of person before whom the declaration is made

NOTE: This declaration may be witnessed by any person who is at least 18 (eighteen) years of age. This written statutory declaration must comply with Part 4 of the *Oaths Affidavits and Declarations Act 2010*. Making a declaration knowing it is false in a material particular is an offence for which you may be fined or imprisoned.