**Form B**

**Refusal of Retail Hospitality and Leisure Relief form**

|  |  |  |
| --- | --- | --- |
| Address of premises in Dorset Council area | Business Rates reference | Amount of Retail Hospitality and Leisure Relief |
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| --- | --- |
| I confirm that I wish to refuse the 2024/2025 Retail Hospitality and Leisure Relief in relation to the above premises.  I confirm that I am authorised to sign on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of ratepayer)  I understand that by opting out of this additional support I will be unable to opt back in later. | |
| Business Representatives Name |  |
| Business Representatives Position |  |
| Signature |  |
| Date |  |
| Email Address |  |

Please complete and return this form to the contact details shown on your Dorset Council Business Rates bill by email or post.