



POSTAL ADDRESS for return of information:

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Phone number \_\_\_\_\_

( In case we need to clarify any information you have supplied us with.)

**DECLARATION**

I declare that the content of this application is true.

\_\_\_\_\_  
Ratepayer's signature

Date \_\_\_\_\_

Name \_\_\_\_\_ [please print] Date \_\_\_\_\_

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**Horizons Regional Council  
CONTIGUOUS UNSOLD SUBDIVISION Rate Remission Criteria**

Rating units that meet the criteria under this policy may qualify for a remission of uniform annual general charges and any targeted rate set on the basis of a fixed dollar charge per rating unit. The ratepayer will remain liable for at least one set of each type of charge.

This remission applies for financial years starting **from 1 July 2012 onwards.**

The contiguous rating units on which remission is given must be owned by the same ratepayer, **must be available for sale, must not be used for different purposes or by different occupiers while awaiting sale nor rented as separate properties.** Only one of the units may have any residential dwelling situated on the rating unit.

Ratepayers wishing to claim a remission should make an application on the form prescribed by Horizons. **The onus will be on the ratepayer to demonstrate that s/he meets the conditions and criteria set.**

Decisions on remission of uniform charges will be delegated to the chief financial officer as set out in the Council's delegations resolution. In addition the remission will be reviewed every three years.