Form A: cash cap and exemption threshold declaration

Dear[]		
NON-DOMESTIC RATES ACCOUNT	NUMBER:	
The value of the non-domestic rates to provided to [name of undertaking] by	•	
This award shall comply with the cash Relief and the exemption threshold or (together with any other companies in the Retail, Hospitality and Leisure Rel not receive more than £343,000 in tot (including 2024/25).	n the basis that, including the the same Group) shall not lief Scheme for eligible prop	receive more than £110,000 of perties within 2024/25 and shall
List of RHL Relief in 2024/25.		
Value of RHL Relief	Property Reference No.	Local authority providing subsidy
List of other subsidies (excluding RHL Value of other Propert subsidies (2022/23 No. to 2024/25)	relief for 2024/25) y Reference Local authors subsidy	ority providing
I confirm that: 1) I am authorised to sign on behalf of	f[nam	ne of ratepayer]; and
2)[name of rate £110,000 cash cap limit for 2024/25 F Amounts of Financial Assistance limit	epayer] shall not by accepti Retail, Hospitality and Leisu of £343,000 over three yea	ing this relief exceed the re Relief Scheme or the Small ars (including 2024/25).
SIGNATURE: NAME: POSITION: BUSINESS:		

ADDRESS and DATE: