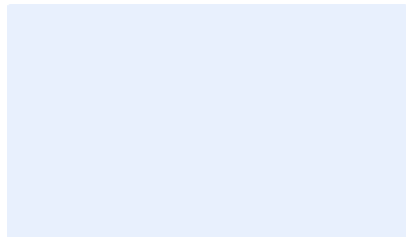


Application for Write Offs on Māori Freehold Land Historical Debt

Unrecoverable Section 90A

Unrecoverable Section 90B – Deceased Owners (note year deceased):

Property Information

Property ID	PID number(s) - include apportionments	Valuation Roll Number	Assessment number(s) - include apportionments.
Property Address	Property Address.		
Legal Description	Legal description		
Owners			
Land Value	LV	Property Category	
Capital Value	CV	Land Use	
Improvement Value	Difference between CV and LV	Area	

Rates Arrears & Remission Information

Prior Arrears	\$	Last Payment Date	
Rates Current year	\$	Current Remission	
Total Amounts Owing		Remission %	

Please see reverse and complete the Declaration form

Declaration

Applicant's Name	First name(s), (include middle names) Last name	
Contact Number		Email Address
Postal Address	Full address, including postcodes and rural delivery numbers if applicable	

<p>Is the land unoccupied and unused?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Are the Owners/Trustees aware of your application? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Is there any income derived from the land? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes, please provide any financial statements to support your application</i></p>	

If used or occupied, please provide details on how the land is used

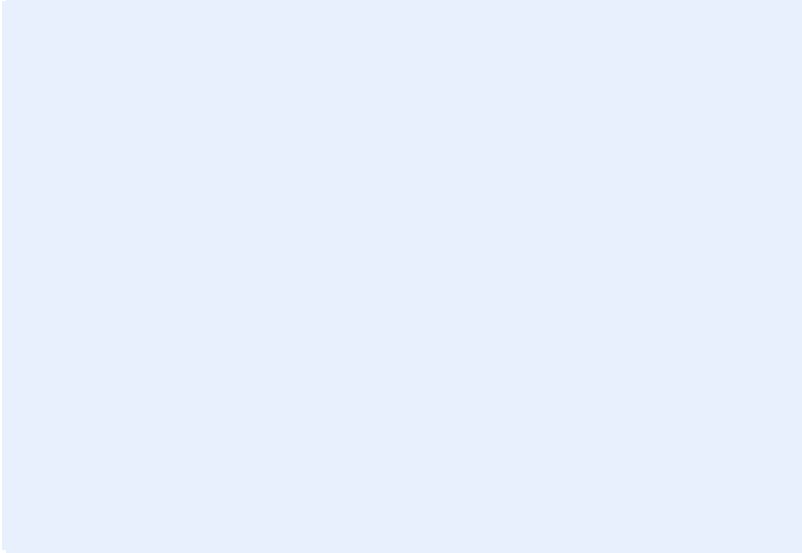
<input type="checkbox"/> Leases on the land	<input type="checkbox"/> Resides on the land
<input type="checkbox"/> Depastures or maintains livestock on the land	<input type="checkbox"/> Stores anything on the land
<input type="checkbox"/> Uses the land in any other way	<input type="checkbox"/> Others (please specify below)

Are there any buildings on it? Please list and attach photos

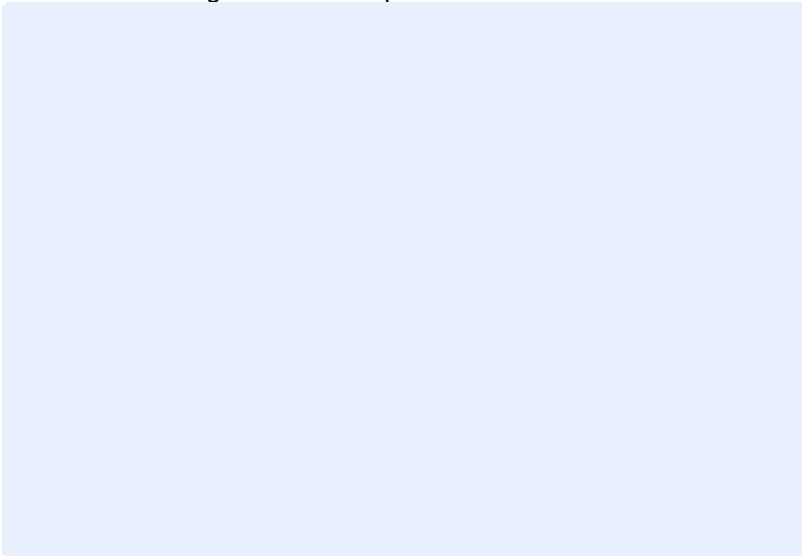
Why would you like Council to write off the rates?

On the map below/attached, please mark the area you are applying for a write off

insert or attach GIS map



**insert from Google satellite maps



I declare that all the details provided are true and correct

Applicant's signature:		Date	
Name in Print			