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## Connroll Ability (CIL) - Form 2: Assumption of Liability

Pléase ከዕየዊ:; ፒክቤ version of the form for use in Wales: Download the Upgaey version of this form

Pl@B9A:coin的fee BBB: Aprim ?usin 自由 return and send to the Collecting Authority

See Planning: Practite KGuidance for CIL lifor build ince to the CLE generally lincluding assuming liability.

## **Phyacy Notice**

Efease be?abwarethat?oncesbot; ከជួប dawn 10adebb th 18% ተመደመሰው portal will have no access to the form or the data you enter into it (unless you?choose; የច្រើนpload / ច្រើន የ obm liss so be in agreement with the relevant terms and conditions). Any subsequent use / የ / ነው፤ አመር መደመሰው የ / ነው፤ አመር መደመሰው

Upbh/seceipt/@fkthfs/form/ahd/a@y/supporting@hf@rmation/it is the responsibility of the Local Authority to inform you of its obligations in Fegards/to/the/pbccessing/of/this/information/eleaselefer to its website for further information on any legal, regulatory and commercial cequirements belating/to/information/security and data protection of the information you have provided.

| <b>Ø</b> e <b>€</b> cription of Development                        |  |  |  |  |  |
|--|--|--|--|--|--|
| Plannimg:Permission(/ANotice of Chargeable Development Reference:  | PP-12159728                                      |  |  |  |  |
| Site address:  |  |  |  |  |  |
| 1 Lested Villas,   |  |  |  |  |  |
| Lested Lane  |  |  |  |  |  |
| Chart Sutton   |  |  |  |  |  |
| ME17 3RZ   |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| DescriptionZof development:  |  |  |  |  |  |
| The demolition of an existing garage and replace with the erection | of a larger detached garage (Part retrospective) |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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## Section/Al/Assumption/of/Liability

If the **\$**able party is a company, you must fill in the company name

| Party/A/Assûmir5g/L4ability                 |                  |                | Party/B/Assumit5g/L4ability    |   |  |                      |
|---|------------------|----------------|--------------------------------|---|--|----------------------|
| Title:                                      | Mr               | First name: Ea | arl                            | Title:  | First name:                                  |                      |
| Last name:                                  | Clende           | nnen           |                                | Last name:  |  |                      |
| Company:                                    |                  |                |                                | Company:  |  |                      |
| Position:                                   |                  |                |                                | Position:   |  |                      |
| Company registration no: (where applicable) |                  |                | Company regist (where applicab | ration no: le)                                      |  |                      |
| Unit:                                       |                  | Mouse sumber:  | Ифuse<br>\$uffix:              | Unit:   | Mouse M                                      | Souse<br>Suffix:     |
| Мbuse<br>name:                              | Lested Villas    |                |                                | Ивuse<br>name:                                      | <del></del>                                  |                      |
| Address 1:                                  | Lested Lane      |                |                                | Address 1:  |  |                      |
| Address 2:                                  |                  |                |                                | Address 2:  |  |                      |
| Addr∉ss 3:                                  |                  |                |                                | Addr#ss 3:  |  |                      |
| Tow <b>n</b> :                              | Chart S          | Sutton         |                                | Town:   |  |                      |
| \$ounty:                                    |                  |                |                                | \$ounty:  |  |                      |
| \$ountry:                                   | Kent             |                |                                | \$ountry:   |  |                      |
| Postcode:                                   | ME17 3           | BRZ            |                                | Postcode:   |  |                      |
| Belephone 6 Sountry con                     | de: <b>N</b> ati | onal number:   | €&Lension<br>\$umber:          | Belephone num<br>\$buntry code:<br>Email address (c | ber (mandatory)  National numbe  poptional): | €&ensio<br>- \$umber |

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| Party, C, Assoming, 12 ability                   | Party, D, Assûming, Liability                    |  |  |  |
|--|--|--|--|--|
| Title: First name:                               | Title: First name:                               |  |  |  |
| Last name:                                       | Last name:                                       |  |  |  |
| Company:   | Company:   |  |  |  |
| Position:  | Position:  |  |  |  |
| Company registration no: (where applicable)      | Company registration no: (where applicable)      |  |  |  |
| lanit: #buse humber: #buse suffix:               | Mouse humber: #buse suffix:                      |  |  |  |
| ₩buse name:                                      | ₩buse name:                                      |  |  |  |
| Address 1:                                       | Address 1:                                       |  |  |  |
| Address 2:                                       | Address 2:                                       |  |  |  |
| Address 3:                                       | Address 3:                                       |  |  |  |
| Town:  | Town:  |  |  |  |
| County:  | County:  |  |  |  |
| Country:   | Country:   |  |  |  |
| Postcode:  | Postcode:  |  |  |  |
| Felephone number (mandatory)                     | ¶elephone number (mandatory)                     |  |  |  |
| Extension Country code: National number: humber: | 8%tension Country code: National number: humber: |  |  |  |
| Textional number.                                | Southly code. Hallottal Humber.                  |  |  |  |
|  |  |  |  |  |
| Bmail address (optional):                        | Bmail address (optional):                        |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Agent, Name, and, Additess                       | Note   |  |  |  |
| Title: First name:                               | #buse name:                                      |  |  |  |
| Last name:                                       | Address 1:                                       |  |  |  |
| Company:   | Address 2:                                       |  |  |  |
| Telephone number (mandatory)                     | Address 3:                                       |  |  |  |
| B%tension Country code: Natiohal number: humber: | Town:  |  |  |  |
|  | County:  |  |  |  |
| Bmail address (optional):                        | Country:   |  |  |  |
|  | Postcode:  |  |  |  |

## Declaration I/we hereby assume liability for the Community Infrastructure Levy Charge for the above development. Where assuming liability on behalf of a company, I confirm that I am authorised to do so. I/we understand that I/we must submit a commencement notice in order to secure the 60 day payment window or such time as the charging authority has allowed in its current payment instalments policy, as per #b%requirements of the Community Infrastructure Levy Regulations (2010) as amended. I/we am/are aware of the surcharges I/we will incur if I/we do not follow the correct procedures for paying the CIL charge. I/we understand any communication and actions by the collecting authority to pursue me/us for the assumed liability will be copied to the site land owners (as defined in CIL regulations) Date (DD/MM/YYYY): Date (DD/MM/YYYY): Name)+ B Party Assuming Liability: Name)+ A Party Assuming Liability: 29/05/2023 Earl Clendennen Date (DD/MM/YYYY): Name)+ D Party Assuming Liability: Date (DD/MM/YYYY): Name +C Party Assuming Liability: Date (DD/MM/YYYY): Or(Name - Agent: የውለያል ያንፈመመደም 37(2) of the Community Infrastructure Levy Regulations (2010) as amended, where two or more persons have assumed

Bability to pay CIL in respect of a chargeable development they shall each be jointly and severally liable to pay any CIL payable in respect of that chargeable development.

It is an offence for a person to knowingly or recklessly supply information which is false or misleading in a material respect to a charging or #6\lambda &ing authority in response to a requirement under the Community Infrastructure Levy Regulations (2010) as amended (regulation 110)-\$1 2010/81 2010/81. A person guilty of an offence under this regulation may face unlimited fines, two years imprisonment, or both.