## Community Infrastructure Levy (CIL)

Form 1: Assumption of Liability
This form should be used to assume liability prior to commencement of development. Please complete using block capitals and black ink.

Description	on of Development							
Planning Permission / Notice of Chargeable Development Reference:								
Site address	S:							
Danasiation	a falanda a a a a a							
Description	n of development:							
	Section A: Assun	nption of Lia	ability					
	If the liable party is a company,							
Party A A	ssuming Liability	Party B Ass	uming Liability					
Title:	First name:	Title:	First name:					
Last name:		Last name:						
Company:		Company:						
Position:		Position:						
Company re (where app	egistration no: licable)	Company regi (where applica	istration no: able)					
Unit:	House number: House suffix:	Unit:	House number:	House suffix:				
House name:		House name:						
Address 1:		Address 1:						
Address 2:		Address 2:						
Address 3:		Address 3:						
Town:		Town:						
County:		County:						
Country:		Country:						
Postcode:		Postcode:						
Telephone number (mandatory)  Country code: National number: Extension number:		1 1	mber (mandatory)	Extension				
	de: National number: number:	Country code:	National number:	number:				
Email addre	ess (optional):	Email address	」					
	(1)		V 1 7					

Party C Assuming Liability	Party D Assuming 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)		
Unit: House house suffix:	Unit: House number: House suffix:		
House name:	House name:		
Address 1:	Address 1:		
Address 2:	Address 2:		
Address 3:	Address 3:		
Town:	Town:		
County:	County:		
Country:	Country:		
Postcode:	Postcode:		
Telephone number (mandatory)  Extension	Telephone number (mandatory) Extension		
Country code: National number: number:	Country code: National number: number:		
Email address (optional):	Email address (optional):		
Agent Name and Address	House House		
	oriit: number: suffix:		
Title: First name:	House name:		
Last name:	Address 1:		
Company:	Address 2:		
Telephone number (mandatory)	Address 3:		
Country code: National number: Extension number:	Town:		
National number.	County:		
Email address (optional):	Country:		
	,		

Declaration			
behalf of a company,I confirm that I am auth secure the 60 day payment window or such the requirements of the Community Infrastru- incur if I/we do not follow the correct proced	orised to do so. I/we und time as the charging aut acture Levy Regulations lures for paying the CIL of	harge for the above development. Where ass derstand that I/we must submit a commencer hority has allowed in its current payment insta (2010) as amended. I/we am/are aware of the harge. I/we understand any communication a copied to the site land owners (as defined in 0	ment notice in order to alments policy, as per surcharges I/we will and actions by the
Name - A Party Assuming Liability:	Date (DD/MM/YYYY):	Name - B Party Assuming Liability:	Date (DD/MM/YYYY):
Name - C Party Assuming Liability:	Date (DD/MM/YYYY):	Name - D Party Assuming Liability:	Date (DD/MM/YYYY):
J G J			
Or Name - Agent:	Date (DD/MM/YYYY):		
liability to pay CIL in respect of a chargeable of that chargeable development.	development they shall	tions (2010) as amended, where two or more peach be jointly and severally liable to pay any	CIL payable in respect
collecting authority in response to a requirer	nent under the Commur	ition which is false or misleading in a material nity Infrastructure Levy Regulations (2010) as n may face unlimited fines, two years imprison	amended (regulation