

Community Infrastructure Levy (CIL) - Form 2: Assumption of Liability

This form should be used to assume liability prior to commencement of development.

Please note: This version of the form should only be used for submissions relating to planning applications in England. There is a legacy version of the form for use in Wales: Download the legacy version of this form

Please complete the form using block capitals and black ink and send to the Collecting Authority
See Planning Practice Guidance for CIL for guidance on CIL generally, including assuming liability.

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to a Local Authority in accordance with the 'The Community Infrastructure Levy Regulations 2010 (as amended)'.
Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it (unless you choose to upload it to any Planning Portal online service in agreement with the relevant terms and conditions). Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to a Local Authority with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Authority to inform you of its obligations in regards to the processing of this information. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Description of Development

Planning Permission / Notice of Chargeable Development Reference:

FP-12397721

Site address:

4 ADAM CLOSE, ME17 4QU

Description of development:

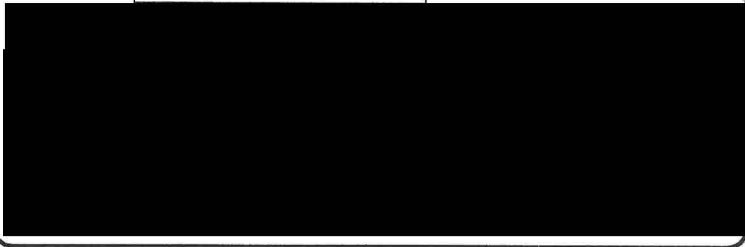
SINGLE - STOREY REAR EXTENSION

Section A: Assumption of Liability

If the liable party is a company, you must fill in the company name

Party A Assuming Liability

Title: First name:
Last name:
Company:
Position:
Company registration no:
(where applicable)
Unit: House number: House suffix:
House name:
Address 1:
Address 2:
Address 3:
Town:
County:
Country:
Postcode:



Party B Assuming Liability

Title: First name:
Last name:
Company:
Position:
Company registration no:
(where applicable)
Unit: House number: House suffix:
House name:
Address 1:
Address 2:
Address 3:
Town:
County:
Country:
Postcode:

Telephone number (mandatory)
Country code: National number: Extension number:

Email address (optional):

