

MAYO COUNTY COUNCIL
DEBT MANAGEMENT UNIT
COMMERCIAL PROPERTY RATES VACANCY RELIEF/BAD DEBT WRITE OFF FORM

CUSTOMER NAME: _____

CUSTOMER ADDRESS:

CUSTOMER ACCOUNT NO: _____

AMOUNT CALCULATED FOR VACANCY RELIEF/WRITE OFF: _____

NATURE OF

ACCOUNT: _____

MEASURES TAKEN TO

COLLECT: _____

REASONS THIS AMOUNT IS DEEMED

UNCOLLECTABLE: _____

I HEREBY RECOMMEND THAT THE AMOUNT INDICATED ABOVE BE WRITTEN OFF DUE TO:

1. BEING AN UNCOLLECTABLE BAD DEBT, OR
2. VACANCY, WHICH HAS BEEN APPLIED FOR IN THE APPROPRIATE YEAR. (COPY ATTACHED)

RECOMMENDED: _____

DATE: _____

REVENUE COLLECTOR

ENDORSED: _____

DATE: _____

HEAD OF DEBT MANAGEMENT UNIT

APPROVED: _____

DATE: _____

HEAD OF FINANCE