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|  |  | **DUNDEE CITY COUNCIL**  **COUNCIL TAX**  **50 NORTH LINDSAY STREET**  **DUNDEE**  **DD1 1NN**  **TELE: (01382) 431205** |

**UNOCCUPIED PROPERTY REVIEW FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | |  | | | | | | | | | | |  | Property Address: | | | | | | | | | | | | | | |
|  | | |  |  | | | | | | | | | | | | | | |
| Your Telephone No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Council Tax Account No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |
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| **1.** Please confirm if you are the : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Owner | | | | |  | Responsible party | | | |  | | Neither | | | | | |  | *Please tick appropriate box(es)* | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you are responsible, in what capacity are you responsible? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2.** Is the property still unoccupied? | | | | | | | Yes | |  | |  | | No | | |  |  | | |  | | | |  | | | | | |
| **3.** Is the property requiring major repair work to make it habitable or is it | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| undergoing structural alteration? | | | | | | | | | | | | | | | | | | | | | Yes |  | No | | |  | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If Yes: When did you purchase the property? | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | |
| Date work commenced | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | |
| Expected completion date | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | |
|  | | | | Please describe work being carried out below. | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.** Why is the property unoccupied? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Being Repaired/ Renovated | | | | | | | | | | |  | | Intend to repair/renovate but no funds | | | | | | | | | | | |  | |  | |  |
|  | | | | | | | | | | |  | |  | | | | | | | | | | | |  | |  | |  |
| Trying to Sell | | | | | | | | | | |  | | Unable to find tenant | | | | | | | | | | | |  | |  | |  |
|  | | | | | | | | | | |  | |  | | | | | | | | | | | |  | |  | |  |
|  | | | | | | | | | | |  | | Other (please specify below) | | | | | | | | | | | |  | |  | |  |
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| **5.** When do you think the property will become occupied? | | | | | | |
|  | | | | | | |
| <6 months | |  | 6-12 months |  |  |  |
|  | |  |  |  |  |  |
| 1-2 years | |  | Greater Than 2 years |  |  |  |
|  | |  |  |  |  |  |
|  | |  | Other (please specify below) |  |  |  |
|  |  | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **6.** Please describe the condition of the property | | | | | | | | | | |
|  | | | | | | | | | | |
| Very Good |  | Good | | | |  | |  | |  |
|  |  |  | | | |  | |  | |  |
| Fair |  | Poor | | | |  | |  | |  |
|  |  |  | | | |  | |  | |  |
|  |  | Very Poor | | | |  | |  | |  |
|  |  |  | | | |  | |  | |  |
| **7.** Does being the owner/responsible party cause any problems/concerns for you? | | | Yes |  | No | |  | |  | |
|  | | | | | | | | | | |

If Yes please explain the problems created below.

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| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **8.** Which of these services might help encourage you to bring your property back into residential use? | | | | | | | |  | | | | | | | | Advice on renovating | |  | Advice on selling |  |  |  | |  | |  |  |  |  |  | | Help to find a buyer or tenant | |  | Discounts for builders/estate agents /solicitors |  |  |  | |  | |  |  |  |  |  | | VAT reductions on renovations | |  | Other (please specify below) |  |  |  | |  |  | | | | | | | |
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| **Declaration And Signature**  In order to check the accuracy of information, prevent or detect crime and protect public funds we may exchange  information provided by you with other departments of the council, local authorities, government departments or organisations responsible for auditing or administering public funds.  **I understand that if I give information that is not correct or complete you may take action against me and that you may share information with other organisations as allowed by law.** | |
| **Signature of liable person or agent** | **Date** |