

APPENDIX 1 –

DISPENSATION REQUEST FORM

You should give full details below in support of your application for a dispensation. If you need help completing the form please contact the parish clerk.

Your name	
The business for which you require a dispensation (refer to agenda item number)	
Details of your interest in that business <i>(continue on a separate sheet if necessary)</i>	
Date of meeting or period (up to 4 years ²) for which you are seeking a dispensation	To expire with the current term of office
<p>Tick one of the following</p> <p><input checked="" type="checkbox"/> require a dispensation to participate, or participate further, in any discussion of the business, or</p> <p><input type="checkbox"/> require a dispensation to participate in any vote, or further vote, taken on that business</p>	
<p>Reason(s) for requiring a dispensation. Tick one or more of the following boxes relating to paragraphs from S.33 of the Localism Act:</p> <p><input type="checkbox"/> 33a) without the dispensation the number of persons unable to participate in the transaction of business would be so great as to impede the transaction of the business;</p> <p><input type="checkbox"/> 33b) without the dispensation the representation of different political groups would be affected so as to alter the likely outcome of any vote;</p> <p><input checked="" type="checkbox"/> 33c) the dispensation is in the interests of persons living in the authority's area;</p> <p><input type="checkbox"/> 33e) that it is otherwise appropriate to grant a dispensation</p> <p>Reason:</p>	

Signed: _____ Date: _____

2. A dispensation cannot extend beyond the your term of office

DECISION:

Dispensation granted: YES / NO Length of dispensation:

Date: Minute Number:

Signed: Clerk to the Council