XXX PARISH COUNCIL DISPENSATION REQUEST FORM

Please give full details of the following in support of your application for a dispensation. You should refer to the accompanying 'Dispensations Guidance'. If you need any help completing this form please contact the parish clerk.

| Your name | |
|--|----------|
| The business for which you require a dispensation (refer to agenda item number if appropriate) | |
| Details of your interest in that business | |
| Date of meeting or time period (up to 4 years) for which dispensation is sought | |
| Dispensation requested to participate, or participate further, in any discussion of that business by that body | Yes/No |
| Dispensation requested to participate in any vote, or further vote, taken on that business by that body | Yes/No |
| Full reasons why you consider a dispensation is necessary (use a continuation sheet if necessary) | |
| Signed: | _ Dated: |

Please give your completed form to the parish clerk. You will receive written notification of the parish council's decision within 5 working days of the decision.