





## COMMUNITY INFRASTRUCTURE LEVY (CIL) Form 2: Assumption of CIL Liability

**CIL Form 2: Assumption of Liability** should be used to assume liability for the payment of the CIL, prior to commencement of development.

Section 1. Desc	cription of De	velopment				
Planning Applica	ation Number:					
Site Address:						
Description of C Development:						
Section 2. Assi						
Party A	A: Assuming I	_iability	Party	B: As	suming Lial	bility
	Personal Detail	S		Perso	onal Details	
Title:			Title:			
First Name:			First Name:			
Surname:			Surname:	Surname:		
Company (where relevant):			Company (where relevant):			
Position (where relevant):			Position (where relevant)	:		
	Contact Details	<b>S</b>		Contact Details		
Email Address:	1		Email Address:	1		
	2		Email Address.	2		
Phone Number:	1		Phone Number:	1		
	2			2		
Address			Address			
Address:			Address:			
Postcode:			Postcode:			
Apportioning Liability			Apportioning Liability			
Percentage of the CIL levy the party assumes liability for:  %		Percentage of the	Percentage of the CIL levy the party assumes liability for:		%	
1. Please be aware t liable parties assume Otherwise this form of 2. If an email addres	e responsibility for cannot be accepte	must total 100%.	7. Please be aware liable parties assun Otherwise this form 2. If an email address.	ne resp canno	oonsibility for mu ot be accepted.	ıst total 100%.

preferred method of contact for any future CIL | the preferred method of contact for any future CIL

correspondence, unless you indicate otherwise.

correspondence, unless you indicate otherwise.

Party C: As:		Party D: Assuming Liability				
Personal Details			Personal Details			
Title:			Title:			
First Name:			First Name:			
Surname:			Surname:			
Company (where relevant): Position			Company (where relevant): Position			
(where relevant):			(where relevant):			
Conta	act Details		Contact Details			
Email Address:			Email Address:	1		
2			2	2		
Phone Number: 1 2			Phone Number:	1 2		
Address			Address			
Address:			Address:			
Postcode:			Postcode:			
Apportioning Liability			Apportioning Liability			
Percentage of the CIL levy the party assumes liability for:			Percentage of the CIL levy the party assumes liability for:  %			%
<ol> <li>Please be aware that the proportion of the CIL that the liable parties assume responsibility for must total 100%.</li> <li>Otherwise this form cannot be accepted.</li> <li>If an email address is provided, we will utilise this as the preferred method of contact for any future CIL correspondence, unless you indicate otherwise.</li> </ol>			Please be aware that the proportion of the CIL that the liable parties assume responsibility for must total 100%. Otherwise this form cannot be accepted.     If an email address is provided, we will utilise this as the preferred method of contact for any future CIL correspondence, unless you indicate otherwise.			
Section 3. Agent Details (if relevant)						
Personal Details			Contact Details			

Personal Details				
Title:				
First Name:				
Surname:				
Company:				
Position:				
Address:				
Postcode:				

Contact Details			
	1		
Email Address:	2		
Phone Number:	1		
Filone Number.	2		

Please Note: If an email address is provided, we will utilise this as the preferred method of contact for any future CIL correspondence, unless you indicate otherwise.

Section 4. Additi	onal Information				
If necessary, please detail below any supporting evidence:					
Section 5. Declar	ration				
understand that I/we read in or such time as the corequirements of	ability for the Community Infrastructure Levy Conust submit a commencement notice <sup>1</sup> in order charging authority has allowed in its current promunity Infrastructure Levy Regulations (20 will incur if I/we do not follow the correct proconunication and actions by the collecting authority to the site land owners (as defined in CIL regulation 67, notification of commencement 6: Commencement Notice as published by the effect) prior to commencement of development agree to the above terms and conditions for our provided is accurate to the best of our known	to secure the 60 day payment window payment instalments policy, as per the 10) as amended. I/we am/are aware of edures for paying the CIL charge. I/we prity to pursue me/us for the assumed ations).  The Secretary of State (or a form to the cont.  The Assumption of Liability and certify			
Signed - Party A Assuming Liability:	Date (DD/MM/YY	YY):			
I/we have read and agree to the above terms and conditions for the Assumption of Liability and certify that the information provided is accurate to the best of our knowledge.					
Signed - Party B Assuming Liability:	Date (DD/MM/YY	YY):			
I/we have read and agree to the above terms and conditions for the Assumption of Liability and certify that the information provided is accurate to the best of our knowledge.					
Signed - Party C Assuming Liability:	Date (DD/MM/YY	VV).			
// I/we have read and agree to the above terms and conditions for the Assumption of Liability and certify that the information provided is accurate to the best of our knowledge.					
Signed - Party D Assuming Liability:	Date (DD/MM/YY	YY):			

Please Note: A hand written signature is required for each party assuming liability.

Under regulation 37(2) of the Community Infrastructure Levy Regulations (2010) as amended, where two or more persons have assumed liability to pay CIL in respect of a chargeable development they shall each be jointly and severally liable to pay any CIL payable in respect of that chargeable development.

It is an offence for a person to knowingly or recklessly supply information which is false or misleading in a material respect to a charging or collecting authority in response to a requirement under the Community Infrastructure Levy Regulations (2010) as amended (regulation 110, SI 2010/ 948). A person guilty of an offence under this regulation may face unlimited fines, two years imprisonment, or both.

## Section 6. Agent Declaration (if relevant)

I/we hereby assume liability for the Community Infrastructure Levy Charge for the above development. I/we understand that I/we must submit a commencement notice<sup>1</sup> in order to secure the 60 day payment window or such time as the charging authority has allowed in its current payment instalments policy, as per the requirements of the Community Infrastructure Levy Regulations (2010) as amended. I/we am/are aware of the surcharges I/we will incur if I/we do not follow the correct procedures for paying the CIL charge. I/we understand any communication and actions by the collecting authority to pursue me/us for the assumed liability will be copied to the site land owners (as defined in CIL regulations).

<sup>1</sup>In compliance with CIL Regulation 67, notification of commencement must be submitted and received in writing on CIL Form 6: Commencement Notice as published by the Secretary of State (or a form to substantially the same effect) prior to commencement of development.

I/we have read and agree to the above terms and conditions for the Assumption of Liability and certify that the information provided is accurate to the best of our knowledge.

Signed - Agent:	Date	
	(DD/MM/YYYY):	

Please Note: A hand written signature is required.

Details on how Shropshire Council uses your data can be found at: https://shropshire.gov.uk/privacy/privacy-notices/

Once completed and signed, this form can be returned either by email or post.

It can be emailed to: CIL@Shropshire.gov.uk

It can be posted to: CIL Team, Planning Policy, Shropshire Council, PO Box 4826,

Shrewsbury, SY1 9LJ