

# 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.***