

NORTHAMPTON BOROUGH COUNCIL WRITE OFF FORM

To be used as part of the Council's Write Off Procedures for Council Tax, Overpaid Housing Benefit, Housing, Former Tenant Arrears and Sundry Debtors

PART 1: CUSTOMER DETAILS	
Customer Ref: Custo	omer Account:
Name / Company:	
Address:	
PART 2: REASON FOR WRITE OFF	
(1) Deceased	(6) Balance uneconomical to pursue
(2) Unable to trace whereabouts	(7) Extenuating circumstances
(3) Bankruptcy / Insolvency / Administration	(8) Statute Barred
(4) Recovery Procedures exhausted	(9) Local authority error
(5) Disputed / Unresolved Query	(10) Agreed Settlement figure
Please tick appropriate box and supply necessary paperwork to substantiate write off.	
Service departments must submit a report to Cabinet for amounts in excess of £10,000	
	AUTHORISATION
Originating Officer	Authorised by Team Leader / Manager
Signed:	Signed:
Signed:	Signed:
	Date:
Date:	Date: PRINT NAME:
Date: PRINT NAME: JOB TITLE:	Date: PRINT NAME:
Date: PRINT NAME: JOB TITLE: PART 4: AUTHORI	Date: PRINT NAME: JOB TITLE: SATION BY FINANCE
Date: PRINT NAME: JOB TITLE: PART 4: AUTHORI Corporate Financial Officer:	Date: PRINT NAME: JOB TITLE: SATION BY FINANCE
Date: PRINT NAME: JOB TITLE: PART 4: AUTHORI Corporate Financial Officer: Signed:	Date: PRINT NAME: JOB TITLE: SATION BY FINANCE Dated:
Date: PRINT NAME: JOB TITLE: PART 4: AUTHORI Corporate Financial Officer: Signed:	Date: PRINT NAME: JOB TITLE: SATION BY FINANCE Dated: TO COMPUTER SYSTEMS FOR AN AUDIT TRAIL