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## Community Infrastructure Levy (CIL) - Form 4: Transfer of Assumed Liability

Parties may transfer liability to pay at any time up to the day before the date when final payment is due

Please complete the form using block capitals and black ink and send to the Charging Authority (or Collecting Authority if this differs from the Charging Authority).

See [\[link\]](#) for guidance on CIL generally, including assuming liability.

### Details of Development

Planning Permission / Notice of Chargeable Development Reference:

Site address:

Description of development:

### Name of party who has currently assumed liability (transferor)

#### Transferor of Liability

Title: <input type="text"/>	First name: <input type="text"/>	Address 1: <input type="text"/>
Last name: <input type="text"/>		Address 2: <input type="text"/>
Company (optional): <input type="text"/>		Address 3: <input type="text"/>
Position: <input type="text"/>		Town: <input type="text"/>
Company registration no: (where applicable) <input type="text"/>		County: <input type="text"/>
Unit: <input type="text"/>	House number: <input type="text"/>	Country: <input type="text"/>
	House suffix: <input type="text"/>	
House name: <input type="text"/>		Postcode: <input type="text"/>
Telephone number	Extension number:	Email address (optional):
Country code: <input type="text"/>	National number: <input type="text"/>	<input type="text"/>

#### Declaration of Transferor

I/we hereby withdraw my/our assumption of liability for the Community Infrastructure Levy charge for the above development.

I/we understand that transferring this assumption of liability will annul any social housing relief which has been granted on this chargeable development.

I/we confirm that this form has been completed prior to the due date for the CIL final payment.

Signed - Transferor of Liability:

Date (DD/MM/YYYY):

# Name of party(ies) who wish(es) to assume liability (transferee(s))

## 1. Transferee of Liability

Title:	<input type="text"/>	First name:	<input type="text"/>		
Last name:	<input type="text"/>				
Company (optional):	<input type="text"/>				
Position:	<input type="text"/>				
Company registration no: (where applicable)	<input type="text"/>				
Unit:	<input type="text"/>	House number:	<input type="text"/>	House suffix:	<input type="text"/>
House name:	<input type="text"/>				
Address 1:	<input type="text"/>				
Address 2:	<input type="text"/>				
Address 3:	<input type="text"/>				
Town:	<input type="text"/>				
County:	<input type="text"/>				
Country:	<input type="text"/>				
Postcode:	<input type="text"/>				
Telephone number					
Country code:	<input type="text"/>	National number:	<input type="text"/>	Extension number:	<input type="text"/>
Email address (optional):	<input type="text"/>				

## 2. Transferee of Liability

Title:	<input type="text"/>	First name:	<input type="text"/>		
Last name:	<input type="text"/>				
Company (optional):	<input type="text"/>				
Position:	<input type="text"/>				
Company registration no: (where applicable)	<input type="text"/>				
Unit:	<input type="text"/>	House number:	<input type="text"/>	House suffix:	<input type="text"/>
House name:	<input type="text"/>				
Address 1:	<input type="text"/>				
Address 2:	<input type="text"/>				
Address 3:	<input type="text"/>				
Town:	<input type="text"/>				
County:	<input type="text"/>				
Country:	<input type="text"/>				
Postcode:	<input type="text"/>				
Telephone number					
Country code:	<input type="text"/>	National number:	<input type="text"/>	Extension number:	<input type="text"/>
Email address (optional):	<input type="text"/>				

## Declaration

I/we hereby assume liability for the Community Infrastructure Levy charge for the above development. This transfer of liability will come into effect on the date that the collecting authority receives the completed, valid transfer form. I/we understand that I/we must further submit a commencement notice, as per the requirements of the Community Infrastructure Levy Regulations (2010) as amended. I/we understand that doing so secures a 60 day payment window, or such time as the charging authority has allowed in its current payment instalments policy. I/we am/are aware of the surcharges and penalties I/we will incur if I/we do not follow the correct procedures for paying the CIL charge. I/we understand that I/we am/are liable for all outstanding CIL charges and any surcharges that may have accrued prior to my/our assuming liability for this development. 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 by the CIL regulations).

Where this transfer has happened prior to commencement: I/we understand that any social housing relief existing for this chargeable development is now null and void and a new claim for relief will need to be submitted, should I/we wish to benefit.

Signed - Transferee of Liability:

Date (DD/MM/YYYY):

Signed - Transferee of Liability:

Date (DD/MM/YYYY):

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.