DISPENSATION REQUEST FORM

Please give full details of the following in support of your application for a dispensation. If you need any help completing this form please contact the parish clerk.

Your name	
The council business/matter for which you require a dispensation (refer to agenda item number if appropriate)	
Details of your interest in that council business/matter	
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 council business/matter by that body.	
Dispensation requested to participate in any vote, or further vote, taken on that council business/matter by that body	
REASON(S) FOR DISPENSATION 33 a) without the dispensation the number of persons unable to participate in the transaction of council business/matter would be so great as to impede the transaction of the council business/matter	
33b) without the dispensation the representation of different political groups would be affected so as to alter the likely outcome of any vote	
33c) the dispensation is in the interests of persons living in the authority's area	
33e) that it is otherwise appropriate to grant a dispensation Reason:	

Signed: _____ Dated: _____

DECISION :

Dispensation Given : YES / NO LENGTH OF DISPENSATION : .....

Date: ..... Minute Number: .....

Signed : ..... Clerk to the Council

CALC © 2012