



Revenues Services  
Herbert Warehouse  
The Docks  
Gloucester GL1 2EQ  
Telephone (01452) 396495

Email: [Revenues@Gloucester.gov.uk](mailto:Revenues@Gloucester.gov.uk)

## OPEN ACCESS REGISTRATION FORM

Please provide the following details. Please complete in black pen.

### Section A – About You.

1. Name or Company \_\_\_\_\_

2. Address of property(ies) in Gloucester \_\_\_\_\_  
\_\_\_\_\_

3. Reference \_\_\_\_\_

(i.e. Council Tax/Business Rates account number, Benefit claim number, or benefit overpayment invoice number)

4. National Insurance number (if applicable) \_\_\_\_\_

5. Please provide a key word or phrase to jog your memory should you forget your password. \_\_\_\_\_  
\_\_\_\_\_

### Section B – If you are a landlord.

If you are a landlord and wish to view details concerning your tenant's benefit claim for which you receive payments direct, please complete this section:

1. Benefit claim number \_\_\_\_\_

2. Do you wish to view only your tenants claims where payments are paid direct to you? Yes /No

3. Do you wish to view your own personal council tax/business rates/ benefit details? Yes/No

**Section C - Declaration**

**I declare that the details provided above are true and accurate and that I have right of access to the information requested. I understand that if I provide false information that I may be prosecuted for deception.**

**Email address** \_\_\_\_\_

**Signed:** \_\_\_\_\_

If you have a partner who is named on your bill or benefit claim, please ask their permission to access these details and sign below:

Signed: \_\_\_\_\_

**Capacity in which you are able to sign:** \_\_\_\_\_  
**(i.e if you are a company, the director etc)**

**Date:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_

**Thank you for completing this application form. Please return this form to the address above.**

**We shall notify you of your user id and password.**