

For the attention of Jill Streener – Accountancy Assistant

**LONGHIRST PARISH COUNCIL**

(Please include Parish / Town Council name)

**PRECEPT REQUIREMENT FROM NORTHUMBERLAND COUNTY  
COUNCIL**

Please specify precept requirement for the financial year **2023-24**.

**NB - Where applicable please ensure this amount is inclusive of the  
Joint Burial Committee's requirement. Your parish is required to pay  
this over to the Joint Burial Committee lead authority.**

£8,000

*(whole pounds only)*

**Signature**



**Print name in capitals**

**HELYN DOUGLAS**

**Office**

**PARISH CLERK**

**Date of Council Meeting  
approving Levy**

**05 JANUARY 2023**

**Only complete the section below if your Bank/Building Society details  
have changed since last year.**

**Name of bank/building society**

**Sort code**

**Account number**

**Account name**
