

Council Tax: Application for a Reduction for a Person with a Disability

BEFORE COMPLETING THIS FORM PLEASE READ THE GUIDANCE NOTES PRINTED OVERLEAF

APPLICANT(S) Please complete section 1, 2 and 3 (only people who are liable to pay the Council Tax can apply for a reduction, but this may be in respect of themselves or others sharing their home).

1. Your full name and address

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Daytime telephone number Council Tax Ref. (if known)

It may be necessary to make an initial inspection of your property to confirm eligibility. We will contact you to make an appointment.

2. Disabled person's details (the disabled person must be living in the dwelling for which the reduction is being sought)

Name and address (if different from above)

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It would be helpful if you could give a brief description of the nature of the disability.

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3. **Grounds for application**

Is there:

i. A room which is predominantly used by and required by the disabled person? YES NO

ii. A second bathroom or kitchen required for meeting the needs of the disabled person? YES NO

iii. A wheelchair used indoors by the disabled person? YES NO

Declaration

The information given on this form is correct. I undertake to notify you immediately if I believe that I am no longer eligible for a reduction granted in respect of this application.

Signature of applicant or their personal representative

.....Date

This form should be returned to the Council Offices at the above address without delay.

Guidance Notes

1. In assessing this application, the authority will need to be satisfied:
 - a) That there is a disabled resident who needs either space for a wheelchair to be used inside the home, or a special additional kitchen, bathroom or other room; and
 - b) That this space or room is essential or of major importance to the well being of the disabled resident because of the nature and extent of his/her disability.

It will help in the consideration of this application if the applicant can supply a note from a doctor, or other qualified professional such as an occupational therapist or social worker, confirming that the disabled resident needs the extra space as stated in section 3 overleaf.

2. If for any reason you are unable to obtain such information easily, then do not delay your application if you believe you are eligible for a reduction. However, we may subsequently need to ask for evidence in support of your application.

This authority is under a duty to protect funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. [Find information about data processing at our privacy notices page.](#)