

COUNCIL TAX



HEAD OF FINANCE ANGUS COUNCIL PO BOX 14 MONIFIETH DUNDEE DD5 4WU TEL: 01382 536500 FAX: 01382 535086 EMAIL: revenquiry@angus.gov.uk	<u>TRANSLATION SERVICES</u> The content of this publication, or sections of it, can be made available in alternative formats or translated into other community languages. Please contact the Council's ACCESSLine on 08452 777 778 for further information or email accessline@angus.gov.uk
If you require any help completing this form please contact the address or telephone number given above	

PLEASE COMPLETE AND RETURN THIS FORM BY / /

COUNCIL TAX LIABILITY FORM

NAME _____

ACCOUNT NO _____

PROPERTY ADDRESS _____

TELEPHONE NO _____

DATE ISSUED _____

CONTACT EMAIL ADDRESS _____

This form should be completed in black ink by the person(s) liable to pay Council Tax in respect of the above noted property. The "Liable Person" is defined as the person(s) who first fall(s) into one of the following categories taking them in order.

- | | |
|---|--|
| 1. The Resident Owner
2. The Resident Tenant
3. The Resident Sub Tenant | 4. The Resident
5. Where the property is unoccupied the person entitled to possession by lease or the owner of the property |
|---|--|

LIABLE PERSONS

Please provide details of liable/joint person(s) in relation to the above noted property and state the category into which they fall.

Full Name	Address if Different from Property Address	Date of Birth (if under 18)	Category Number (see above list)	Date of Purchase/Date Tenancy Began	Date Moved In
(i)					
(ii)					
(iii)					

In addition to the above named person(s) being liable for Council Tax, any person being married to, or living as man and wife with one of the above named persons, shall under Council Tax Legislation be jointly and severally liable for payment of Council Tax.

If you did not move into the property on the purchase/tenancy start date, please confirm the following:

Is the property unfurnished? YES / NO

Date property became furnished / /

Is the property mentioned above a second/holiday home? YES / NO

(If yes, we will issue a Council Tax Property Discount Application to you)

If you have a spouse or partner residing with you who is not shown in the box above please give the following details.

Spouse/Partner's Name _____ Date of Birth (if under 18) _____

If the property mentioned overleaf is a flat please give its exact location within the building eg 1 up left

Please provide below the previous address for all persons mentioned overleaf	Date moved out	Date of sale/tenancy end date	Date furniture removed from the property
(i)			
ii)			
ii)			

If you have recently purchased the property please provide the name and address of your Solicitor

Name _____

Address _____

If you are a tenant of the property, please give name and address of your landlord

Name _____

Address _____

How many persons over 18 years of age (including yourself) are resident in the property? _____

NB You may be liable to a £50 penalty for failing to provide information or providing false information.

The information you have provided on this form and from any supporting evidence will be used by Angus Council (the "data controller" for the purposes of the Data Protection Act 1998) in order to update our records. The information will be held securely by the Council and will be treated as confidential except where the law requires it to be disclosed. The Council may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information from certain third parties or share your information with them in order to check its accuracy, prevent or detect crime, protect public funds or where required by law.

You have the right to request access to personal information that the Council holds about you and to have any inaccuracies corrected. If you wish to do this please contact the Head of Law and Administration on (01307) 461460 or email LAWADMIN@angus.gov.uk.

I/We declare that to the best of my/our knowledge and belief, the particulars shown on this form are true, accurate and complete and authorise Angus Council to use this information for the above purposes.

Date: ___/___/___

Liabe Person(s)
Signature(s)
