

# COUNCIL TAX



<b>HEAD OF FINANCE</b> <b>ANGUS COUNCIL</b> <b>PO BOX 14</b> <b>MONIFIETH</b> <b>DUNDEE DD5 4WU</b>  <b>TEL: 01382 536500 FAX: 01382 535086</b> <b>EMAIL: <a href="mailto:revenquiry@angus.gov.uk">revenquiry@angus.gov.uk</a></b>	<u><b>TRANSLATION SERVICES</b></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 <a href="mailto:accessline@angus.gov.uk">accessline@angus.gov.uk</a>
If you require any help completing this form please contact the address or telephone number given above	

## NOTIFICATION OF CHANGE OF CIRCUMSTANCES

Date of Issue \_\_\_\_\_

This form should only be completed where there has been a change of circumstances, not previously notified, which may affect your Council Tax Bill. This form should be completed in black ink by the person(s) liable to pay the Council Tax in respect of the undernoted property.

NAME OF LIABLE PERSON \_\_\_\_\_ TELEPHONE NO \_\_\_\_\_

ADDRESS OF LIABLE PERSON \_\_\_\_\_ CONTACT EMAIL ADDRESS \_\_\_\_\_

\_\_\_\_\_ ACCOUNT NUMBER \_\_\_\_\_

POSTCODE \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ FLAT LOCATION (if applicable) \_\_\_\_\_  
 (if different from above) eg 1 up left

\_\_\_\_\_ POSTCODE \_\_\_\_\_

Please complete the relevant section(s) below where appropriate.

**PART A - NUMBER OF PERSONS OVER 17 YEARS OF AGE (INCLUDING YOURSELF) NOW RESIDENT IN THE PROPERTY?**

Please supply names of all person(s) now resident in the property aged 17 yrs or over. \_\_\_\_\_

	Full Name	Date of Birth (if under 18 years)	Please state if tenant/owner/partner/boarder/other
1			
2			
3			
4			
5			

**PART B - NUMBER OF PEOPLE IN HOUSEHOLD HAVE INCREASED**

Please supply the names(s) and relevant information of the persons who have moved into the property

	Full Name	Date moved into the property.	Date of Birth (if under 18 yrs)	Please state if tenant/owner/partner/boarder/other	Please state previous address
1					
2					
3					

**PART C - NUMBER OF PEOPLE IN HOUSEHOLD HAVE DECREASED**

Please supply the name(s) and relevant information of the persons who have moved out of the property

	Full Name	Date moved out	Forwarding Address (if known)
1			
2			
3			

**PART D - OTHER CHANGES WHICH AFFECT EXISTING DISCOUNT ENTITLEMENT (EG: PERSON CEASING TO BE A STUDENT, APPRENTICE, YOUTH TRAINING TRAINEE, IN DETENTION ETC)**

- 1 Name of person who should no longer be disregarded for discount purposes
- 2 Details of change
- 3 Date of change

	PERSON (i)	PERSON (ii)	PERSON (iii)

**PART E CHANGES WHICH AFFECT EXISTING PROPERTY EXEMPTION (EG PROPERTY PREVIOUSLY UNOCCUPIED NOW OCCUPIED)**

Details of change \_\_\_\_\_

Date of change \_\_\_\_\_

**NB You may be liable for 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](mailto:LAWADMIN@angus.gov.uk).

Declaration:

I declare that the information given in this application is to the best of my knowledge correct and undertake to notify you immediately if the circumstances of the property change. I authorise Angus Council to use my information for the above purposes.

Date \_\_\_ / \_\_\_ / \_\_\_

Liable Person(s)  
Signature(s) \_\_\_\_\_

\_\_\_\_\_