

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	

PROPERTY EXEMPTION APPLICATION FORM OCCUPIED PROPERTY

This application should be completed in black ink by the person liable to pay Council Tax for the relevant property or an agent acting on his/her behalf. Please complete Section A by ticking the appropriate Yes or No box and provide further details, where required. The application form must be signed at Section B and returned to the above office as soon as possible.

Name of Liable Person _____	Agent's Name _____ (if applicable)
Address _____	Address _____
_____	_____
_____	_____
Daytime Tel. No. _____	Daytime Tel. No. _____
Contact email address. _____	Contact email Address: _____
Enter the address of the property for which you are claiming exemption (if different from above) _____	
_____	Account No _____

SECTION A - OCCUPIED PROPERTY

1) **Is every person living in the property currently either a student, a recent school or college leaver under 20 years of age, or a person under 18 years of age?**

Yes No

If yes, please complete relevant section.

Students

NAME	DATE OF ENTRY TO PROPERTY	DATE OF BIRTH	COURSE START DATE	COURSE END DATE	NAME OF COURSE	NAME OF COLLEGE/ UNIVERSITY

NB: A STUDENT CERTIFICATE MUST BE SUPPLIED FOR EACH STUDENT LISTED ABOVE

Recent school/college leaver under 20 years of age

NAME	DATE OF ENTRY INTO PROPERTY	DATE OF BIRTH	DATE OF LEAVING SCHOOL/COLLEGE

Persons under 18 years of age

NAME	DATE OF BIRTH

- 2) **Is the property used by a Registered Housing Association as a trial flat?** Yes No

If yes, please give name and address of Housing Association _____

- 3) **Is the liable person a member of a Visiting Force?** Yes No

Is the liable person a dependant of a member of a Visiting Force? Yes No

If yes, is the dependant a British citizen or someone who is ordinarily resident in the United Kingdom?
Yes No

Please give the name of the person who is a member of a Visiting Force and the name of the Visiting Force concerned.

Name _____ Visiting Force _____

- 4) **Is every person living in the property severely mentally impaired?** Yes No

If yes, please give name(s) _____

Please state which of the undernoted allowances they receive:

Incapacity Benefit, Attendance Allowance, Severe Disablement Allowance, Higher or Middle Rate Care Component of Disability Living Allowance, Disability Working Allowance, Unemployability Supplement, Constant Care Allowance, Unemployability Allowance or Income Support Disability Premium, Disabled Persons Tax Credit, Increased Disablement Pension due to the need for constant attendance.

Give date the Allowance commenced ___/___/___

If this section applies, the enclosed certificate should be completed by a Doctor to verify the mental impairment and returned along with this application form.

SECTION B

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 process the requested Council Tax Property Exemption. 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.

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.

Signature _____

Date ___/___/___

N.B. YOU MAY BE LIABLE TO A £50 PENALTY IF YOU TRY TO OBTAIN COUNCIL TAX EXEMPTION FOR YOURSELF OR ANYONE ELSE DISHONESTLY.

IN CERTAIN CIRCUMSTANCES AN OFFICER OF THE COUNCIL MAY CONTACT YOU WITH A VIEW TO ARRANGING A VISIT TO THE PROPERTY.