



APPLICATION FOR COUNCIL TAX REDUCTION UNDER SECTION 13A OF THE LOCAL GOVERNMENT FINANCE ACT 1992

Please note that if a joint bill has been issued then the application must also be made in joint names.

Name of Applicant(s)	Telephone No:
Contact Address:	Email Address:
Owners Name(s):	Address of property for which a discount is being claim:
What is the value of equity in the property? £	
Is the property currently marketed for sale? Yes <input type="checkbox"/> No <input type="checkbox"/>	Please provide details of marketing agent for this property:
Is the property currently marketed for rent? Yes <input type="checkbox"/> No <input type="checkbox"/>	Please provide details of marketing agent for this property:

Please provide details of any other properties or land owned by yourself and value of any rental income you are in receipt of:

If you have left a property to move to more suitable accommodation or to receive or provide care due to old age, disablement, illness, alcohol or drug misuse or mental disorder then please provide details below:

Please provide the detailed reasons why you are applying for a reduction in Council Tax. This should fully explain the circumstances that are creating financial difficulty and how long you expect these circumstances to continue:

Has an application for Council Tax Support been made?

Yes

No

Are you receiving financial assistance from any other source?

Yes

No

Have you approached any organisation to assist with your current financial situation such as Citizen Advice Bureau/Money Advice etc?

Yes

No

Please provide details:

Please provide details of any stocks/shares/savings/money you may have or money you are owed:

Please provide any additional information you may wish to provide in support of your application:

Your application will not be processed unless the enclosed financial information sheet is completed and returned.

All applicants must provide documentary evidence in support of their claim. At a minimum these should include the following:

- Confirmation of income received
- Bank statements
- Any additional information to support the application
- Written details of any savings/stocks/shares

I declare that the information I/we have given on this form is complete and accurate.

I/we understand that a copy of this form may also be sent to the Council's Client Support Officer who may be able to offer further advice and assistance.

I/we understand that whilst this application for discount is pending I/we are not entitled to withhold payment of the council tax due to the Council.

Signature(s): _____

Date: _____

Full Name(s) _____ **(please print)**
