

Local Government Finance Act 1992 (Section 13)

# Application for Council Tax Disablement Relief

**Please read the notes overleaf first.** Further assistance can be obtained by calling the telephone number overleaf. If, after reading the notes, you believe you may qualify for relief due to disability, please complete and return this form.

## Section A

This section relates to the person making the application who must be a person liable to pay the Council Tax for the property in question.

A1 Name.....

A2 Address.....

Post code..... Telephone Number.....

## Section B

This section relates to the disabled person who must live in the dwelling for which the reduction is being requested.

B1 Name.....

B2 Address.....

## Section C

This section relates to the grounds on which the reduction is being sought. Please circle the Yes or No in answer to the following questions.

- (i) Is there a room predominantly used by and required for meeting the needs of the disabled person. YES/NO
- (ii) Is there a second bathroom or kitchen required for meeting the needs of the disabled person. YES/NO
- (iii) Is a wheelchair in permanent use by the disabled person. YES/NO  
(Please see notes overleaf for a further explanation)

Please explain the nature of the disability; .....  
.....

## Declaration

The information given on this form is correct to the best of my knowledge. I undertake to notify the Council immediately if there are any changes in circumstances relevant to this application.

Signature of Applicant..... Date.....

## Explanatory Notes

In assessing your application the Council will need to be satisfied; -

- (i) That the room is predominantly used (whether for providing therapy or otherwise) by the disabled person; i.e. to allow for the installation and use of dialysis equipment.
- (ii) That the bathroom or kitchen is not the only bathroom or kitchen in the dwelling, and has been installed for meeting the needs of the disabled person.
- (iii) A wheelchair is not required for meeting the individual's needs if he/she does not need to use it at all times within the living accommodation comprising or included in the dwelling concerned.

If it appears that the reduction may apply, the Council will arrange for an inspector to call and discuss the matter further with you.

If you have difficulty filling in this form, or you have any related queries please telephone 01462 474000.

On completion of the form, please return it to;

Revenues Services  
Town Lodge  
Gernon Road  
Letchworth Garden City  
Herts  
SG6 3HN