Rossendale Borough Council PO Box 104 Futures Park, Bacup, OL13 3BU Tel: 01706 217777 RETURN THIS FORM TO: counciltax@rossendalebc.gov.uk



COUNCIL TAX ACCOUNT NUMBER

DATE

## **APPLICATION FOR DISCOUNT- A CARER (35 HOURS+)**

#### TO BE COMPLETED BY THE LIABLE TAXPAYER

	DDRES	S OF PROPERTY F	OR WHICH DIS	COUNT IS E	BEING CLAIMED					
N	AME O	F PERSON BEING (	CARED FOR							
	<b>Details</b> Title	of resident carer (w Forename		e the taxpay	ver but who must	reside at the Surname	address)			
	Total hours care provided per week				Give details if the carer is related to the person receiving care					
	Details Surnar	<b>of person for whom</b> ne	i care is provid	than Council Tax	<u>Pa</u> yer	Title				
	Forena	ame(s)				Date of birth				
Indicate which of the following allowances/pensions are received and enclose proof Please tick appropria										<i>b</i>
	A. Any rate of Attendance Allowance						YES		NO	
	<ul> <li>B. Higher or Middle rate of the care component of D</li> <li>C. Increased rate of Disablement Pension</li> <li>D Increase in Constant Attendance Allowance</li> </ul>				sability Living A	YES		NO		
						YES		NO		
							YES		NO	
		e state briefly the f care provided								
		I number of adult o			ver) in property ir	ncluding the c	arer			
-		hat the information		•	te to the best of	my knowledd	e. I unde	erstand that	at	

the Council may make enquiries as necessary to verify the information given

Signature

Date

DATA PROTECTION STATEMENTPLEASE NOTE: The Council has a duty to protect the public funds it administers. In order to do this, information given to the Council Tax office may be shared within the council and with other external bodies involved in the administration of public funds, for the purposes of the prevention and detection of fraud. The Council will also take steps to verify information given in support of any claim, discount

or exemption by matching with data held elsewhere within the authority or with other external bodies involved in the administration of public funds. Applications for discounts will be verified and subject to periodic review. The Council may use third party organisations to carry out such checks using financial and credit referencing information.

# EXPLANATORY NOTES

### Who can apply?

A person liable to pay the Council Tax for a dwelling which is the sole or main residence of a Carer.

#### When will a discount be awarded?

A discount may only be awarded if there are *less* than two adult occupants (18 years and over in a property. A carer is not counted when calculating the number of occupants. Should this result in there being only one occupant a discount of 25% of the Council Tax Bill may be given. If all occupants are discounted a 50% discount may apply.

#### Requirements

The person to whom care is provided must be in receipt of either:

\* Any rate of Attendance Allowance.

\* The middle or highest rate of the care component of a Disability Living Allowance.

- \* An increased rate of Disablement Pension.
- \* An increased rate of Constant Attendance Allowance.

The carer must be living in the same property as the person who is receiving care, and the care provided must be for at least 35 hours a week on average.

Care provided by either husband or wife to their partner does not qualify, neither does care provided by a parent for a child under 18 years of age.

#### Appeals

If the Council decides not to award a discount an appeal may be made to a Valuation Tribunal.

### Regulations

The official regulations governing Council Tax Discounts are found in various legislation made by Parliament or issued by the Secretary of State. If you wish to

know the relevant regulations you should contact the Council Tax Section at Rossendale Borough Council.

#### Declaration

I declare that the information I give will be complete and accurate to the best of my knowledge.

I understand that the Council may make enquiries to verify my information. I agree to inform the Council Tax department immediately if I believe the property is no longer eligible for a discount or exemption.

If my circumstances change I will inform the Council Tax department immediately.

I understand that failing to do so or providing false information may lead to prosecution.

The information on this form will be used in connection with the billing, collection and recovery of local taxes and revenues, including the calculation of any associated discounts, reliefs and benefits. The data may be disclosed to other local authorities for local taxation purposes only and to the Council's auditors.

This authority is under a duty to protect the public funds it administers and to this end may use this information you have provided on this form within this authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

Information will only be shared with other Council service areas without your permission if it is legitimate for the Council. Information will only be shared with other external agencies without your permission if there is a legal duty to do this or if there is a risk of serious harm or threat to life.

Please tick the box if you agree to the declaration above:

