

# Revenues & Benefits Services

## Council Tax

Application for Discount/Exemption -  
Long Term Care



sustainable thriving achieving

**East Dunbartonshire Council**

www.eastdunbarton.gov.uk

Please use black ink and block capital letters or typescript

### **Background**

The Council Tax due on a property may be discounted or made exempt because of the personal circumstances of the adult residents. For the purpose of this reduction, adults who fulfill one of the following requirements shall be disregarded when counting the number of adults in the house. If all adults meet the following requirements then exemption will be awarded.

#### **Unoccupied House which is:**

1. No longer your sole or main residence and which when last occupied, was occupied by a person who either provides OR receives personal care by reason of:
  - a. Old age;
  - b. Disablement;
  - c. Illness;
  - d. Past or present drug dependence;
  - e. Past or present mental disorder.

#### **OR**

2. A person who has their sole or main residence in an NHS/Armed Forces hospital or in a residential care home/private hospital/hostel where they receive care or treatment.

In order to claim a discount/exemption, please complete Section 1, ask the Hospital/Home to complete Section 2 where applicable, sign the declaration on Page 2 and return the form to the address at the bottom of the page along with the appropriate supporting documentation.

### **Applicant Details**

|                  |  |                       |  |
|------------------|--|-----------------------|--|
| Name             |  | Council Tax Reference |  |
| Property Address |  |                       |  |

### **Section 1: To be completed by the applicant**

I apply for a reduction on the basis that the resident named below fulfils one of the requirements as defined above.

|   |                      |               |  |
|---|----------------------|---------------|--|
| Name  |                      | Date of Birth |  |
| I consider a reduction should apply from (insert date)                            |                      | to            |  |
| The number of adults (including the above named) usually resident in the house is | <input type="text"/> |               |  |

**Please Note - A reduction will not be granted unless supported by documentary evidence.**

| <b>Section 2: To be completed by the Hospital/Home</b>  |           |
|---|-----------|
| I confirm that the person named in Section 1 was admitted to this establishment on the following date (insert date) |           |
| Expected discharge date if known  |           |
| They receive the following care/treatment   |           |
| <b>Hospital/Home Stamp</b>  | Signature |
|   | Position  |
|   | Date      |

| <b>Declaration</b>   |                       |
|--|-----------------------|
| <p>I declare that the information supplied on this form is true, complete and correct to the best of my knowledge and that I will notify the Council within 21 days of any change in circumstances which may affect my liability i.e. status no longer applies or the number of adults increases/decreases. I understand that failure to provide this information is an offence which may make me liable to an initial penalty of £50 and then £200 for each subsequent offence. I understand that any discount awarded as a result of misleading statements deliberately given on this form will be recovered in full. I understand that to deliberately provide false information is a criminal offence and may result in prosecution.</p> |                       |
| Signature  | Date                  |
| Email Address  | Daytime Telephone No. |

| <b>Data Protection Act and General Data Protection Regulations (“GDPR”)</b>   |
|---|
| <p><i>East Dunbartonshire Council holds, uses and processes information in accordance with the General Data Protection Regulations and all other relevant national data protection laws. Your information may be shared with other departments within East Dunbartonshire Council or other organisations for the purposes of administering and collecting council tax and applying relevant reductions, discounts and exemptions; checking the information we hold is accurate; preventing and/or detecting crime and protecting public funds. Other organisations may include bodies responsible for auditing or administering public funds or conducting data checks, other councils, public sector agencies, governmental departments, regulatory and law enforcement bodies and other private companies or entities (such as credit reference agencies, service providers/contractors and/or partner bodies).</i></p> <p><i>For further information detailing how East Dunbartonshire holds and uses your information please refer to the privacy notice enclosed with this form. Details are also available on our website at: <a href="http://www.eastdunbarton.gov.uk/counciltax">http://www.eastdunbarton.gov.uk/counciltax</a></i></p> |

## Other Formats & Translations

**This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council’s Corporate Communications Team at 12 Strathkelvin Place, Kirkintilloch, G66 1TJ, tel 0300 123 4510**

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ براہ مہربانی فون نمبر 0300 123 4510 پر رابطہ کریں۔

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਫੋਨ ਕਰੋ।

Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhìth oirbh. Cuiribh fòn gu 0300 123 4510

अनुवाद करने पर यह दस्तावेज हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फोन कीजिए।