

Any enquiries about this application should be made to the Council Tax Discount Section at the above address or Telephone (01422) 393631

Date _____

Billing Account Reference Number _____

SECTION A	EXPLANATORY NOTES
1.	Certain dwellings are exempt from the Council Tax due to special circumstances involving either the person liable for the charge or the state of the property concerned
2.	In order to set a property in an exempt class certain conditions have to be satisfied. Both the class and the conditions that have to be met are defined in the Local Government Finance Act 1992, the Council having no discretion in these matters.
3.	Details of the classes available for exemption and the information required in order to deal with your application as quickly as possible are contained in Section D overleaf.
4.	When you have filled in Section B and Section D please read and sign the declaration (Section C) and then send the form back to the above address as soon as possible.
5.	Once I am satisfied that all the conditions have been met I am legally obliged to send you a notification to that effect.

SECTION B	APPLICATION DETAILS. (Please complete in block capitals)		
Applicant's Name _____	Reference Number (shown on the bill) _____		
Address _____ _____	Address of the property concerned: _____ _____		
Telephone Number for contact _____			
<i>* Please delete as appropriate.</i>			
Is the property empty? <input style="width: 100px;" type="text" value="* YES / NO"/>	If YES date property vacated	<input style="width: 150px; height: 20px;" type="text"/>	
Is the property furnished? <input style="width: 100px;" type="text" value="* YES / NO"/>	If NO date furniture removed	<input style="width: 150px; height: 20px;" type="text"/>	
Exempt Class applied for (see Section D)	<input style="width: 150px; height: 20px;" type="text"/>		
HAVE YOU PROVIDED ALL THE INFORMATION REQUESTED IN SECTION D?			<input style="width: 100px;" type="text" value="* YES / NO"/>

SECTION C	DECLARATION
As far as I know all the information I have given is accurate and true. I agree to tell the Council immediately if the circumstances change or I think that any reduction given as a result of this application should not apply.	
Name _____	Signed _____ Date _____



SECTION D		EXEMPT DWELLINGS	
CLASS	PROPERTY	REASON	INFORMATION REQUIRED
A	Unoccupied and substantially unfurnished	Major repair works needed (or in progress) to make the dwelling habitable or ongoing structural alterations.	Full details of the work done or required together with any supporting documentation, e.g. Structural Surveyors Report or similar.
B	Unoccupied	Property owned by a charitable body.	Charity Registration Number. Confirmation that was last occupied in furtherance of the objects of the charity.
C	Unoccupied and (apart from caravans) substantially unfurnished	Empty for less than six months or newly erected property.	Date vacated and furniture removed (or) for new property, when the Council Tax completion date is determined.
D	Unoccupied	Owner(s) / Tenant(s) in a place of detention.	Details of place of detention together with date first detained and expected release date.
E	Unoccupied	Owner(s) / Tenant(s) who is a permanent resident in a hospital, residential or nursing home.	Name and address of the hospital, residential or nursing home concerned and the date became resident.
F	Unoccupied	Last occupied by a person now deceased	Details of the executor of the estate and the date of probate or letter of administration granted. If ownership of the property has been transferred or the property sold, please supply details.
G	Unoccupied	Occupation prohibited by law or action taken by Act of Parliament.	Details of the prohibition, i.e. date and action taken and by whom.
H	Unoccupied	Awaiting occupation by a minister of religion from which to perform his duties.	Letter of confirmation from the church that the property is unoccupied for this reason.
I	Unoccupied	Owner(s) / Tenant(s) living elsewhere and receiving personal care due to old age, disablement, illness, alcohol or drug dependency or mental disorder.	Details of the type of care received and the reason why and if possible a letter of confirmation from a person qualified to comment, e.g. doctor or social worker.
J	Unoccupied	Owner(s) / Tenant(s) living elsewhere to provide personal care due to old age, disablement, illness, alcohol or drug dependency or mental disorder.	Details of the type of care provided and the reason why and if possible a letter of confirmation from a person qualified to comment, e.g. doctor or social worker.
K	Unoccupied	Last occupied only by one or more students residing elsewhere for the purpose of their studies.	Name and address of student(s) and details of time and place of course(s) attended.
L	Unoccupied	Repossessed property where the mortgagee is in possession.	Name and address of mortgagee, e.g. Bank or Building Society and if known the date property repossessed and forwarding address of mortgagor.
M		A hall of residence which is predominantly used for the accommodation of students.	Letter of confirmation from the educational institution or charitable body concerned.
N		Property occupied entirely by students, school or college leavers who are studying on an approved course.	Name and address of each student and details of time and place of course attended.
O		Armed forces barracks, messes and married quarters.	Letter of confirmation from the MoD Accommodation Service Unit.
P		A relevant association with a visiting force.	Letter of confirmation from the Commanding Officer
Q	Unoccupied	Trustees in bankruptcy.	Name and address of trustee and date declared bankrupt.
R	Unoccupied	Empty caravan pitch or boat mooring.	Date of removal.
S	Occupied	All occupant(s) are under 18 years of age.	Name and date of birth of occupant(s).
T	Unoccupied (i.e. no ones sole or main residence).	Property owned by the resident of a building within the same curtilage which is difficult to let separately, (e.g. Granny Flats).	Details of any restrictions on occupation. Details of intended use. Home address of occupant(s) if applicable.
U	Occupied	All residents are classed as severely mentally impaired (for Council Tax purposes).	Copy of each resident(s) Council Tax (or Community Charge) Severely Mentally Impaired Certificate.
V		All residents have diplomatic privileges and immunities.	Copy of identification card.
W		Self contained part of a property occupied by a dependant relative.	Details of the resident(s).

Class R effective from the 1st April 1994 only. Class S, T and U effective from the 1st April 1995 only. Class V and W effective from 1st April 1997
Class U amended from 1st April 1999. Class A amended from 1st April 2000.

- “Calderdale MBC will ensure that any personal information provided by you on this form will be treated in accordance with the provisions of the Data Protection Act 1998. Calderdale MBC is the Data Controller of the information you have provided on this form and is registered with the Information Commissioner’s Office for the purposes of processing your personal information in relation to your application.
- The Council must protect the public fund it handles and so may use the information you have provided on this form to prevent and detect fraud. The Council may also share this information, for the same purposes, with other organisations which handle public funds. The Council will not share your information for any other purpose without your explicit consent.
- For further information about Data Protection please contact 0845 2456000 and ask to speak with the Council’s Information Manager.