

## United to Achieve COUNCIL TAX - OCCUPATION DETAILS FORM

			FINANCE & PR TOWN HALL COTON ROAD NUNEATON WARWICKSHIF CV11 5AA Telephone 024	RE - 7637 6534	andbedworth.gov.uk	
Uprn:			Date of issue:			
and Bedwor the change	nould be completed if you have the the law requires changes occurring.  Failure to complete this followed confirm the full address.	of circumstance	es to be notified to	the Council Tax of	office within 21 days of	
	he property is occupied, pleac cupied, please complete 'p Forename(s):	art 5' on the ba		stead.  Date of	Date	
				Birth	moved/moving in:	
PART 3: If Completion Name and	ne <u>owner</u> of the property, pone <u>tenant</u> of this property, pone the <u>owner</u> of the property o	please complete operty, please p	e 'part 4' of this for	orm. g information:		
Date tenar	you are the <u>tenant</u> of the proncy started:d address of your landlord or		-			
Is the prop	perty let furnished:	YES / NO				

PART 5: If the property is unoccupied (and your moving in date is not yet known), please confirm the name and address of the owner or the tenancy holder: Please tick the appropriate box below which NAME: ..... best describes the property: Empty and Unfurnished: CURRENT ADDRESS: ..... Empty and Furnished: Short stay hostel: **Business Use:** PART 6: Please confirm the following details regarding the address you have moved from: Address:..... If you owned this property, please confirm the completion date of sale: Please confirm the names of the new owners: If you rented this property, please confirm the tenancy end date: Please confirm the name of your landlord or letting agent:.... If neither of the above apply, please provide further details: PART 7: Please tick the appropriate box if you wish to apply for a reduction in your council tax bill: Council Tax Support **Disablement Relief** Single Person Discount If any of the people (aged 18 or over) living in the property fall into one of the categories below, you may qualify for a discount. Please indicate in the relevant boxes how many people the description applies to. **DISCOUNT CATEGORIES:** NAME OF PERSON DESCRIPTION APPLIES TO: A. Person in prison. B. Person who is severely mentally impaired. C. Person aged 18 for whom child benefit is payable D. Carers E. Hospital in-patient F. School leaver G. Student. H. Student nurses. I. Apprentice / Y.T.S. Trainee J. Person in residential care Please be advised that a further form will be sent in order for you to apply for any of the above discounts. For further information regarding the above discounts, please contact our offices on 02476 376 534, or visit our website at www.nuneatonandbedworth.gov.uk. I declare that the information given above is correct to the best of my knowledge and belief. Tel: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

## Sharing Information

The information you provide will be used by Nuneaton and Bedworth Borough Council to update its council tax records. The Council may share information provided to it with other bodies responsible for auditing or administering public funds, in order to prevent fraud and detect fraud. The Council may also share information with other Councils within Warwickshire.