

Revenues Section, Town Hall, Coton Road, Nuneaton, Warwickshire, CV11 5AA

Telephone (024) 7637 6534 Email billing.section@nuneatonandbedworth.gov.uk

APPLICATION FOR DISCRETIONARY COUNCIL TAX DISCOUNT

Under Section 13A Section 1 C of the Local Government Finance Act 1992, Local Authorities may consider awarding a discretionary council tax discount to those residents suffering from financial hardship. Each case will be decided on its individual merits but must meet some or all of the following criteria for a case to be considered for this relief.

- There must be evidence of financial hardship or how an individual has been adversely affected to justify a reduction to Council Tax liability.
- The council taxpayer must satisfy the Council that they have taken all reasonable steps to mitigate their hardship such as: -
 - a) Applied for and been awarded any other eligible discounts or reliefs
 - b) Taken all reasonable steps to avoid a request being made (i.e.) must not have been personally negligent in contributing to their request.
 - c) Investigated all other legitimate means of resolving your situation.
- The Council Taxpayer must not have access to other assets that could reasonably be used to pay Council Tax Liability if based on financial hardship
- The Council's financial position allows for a reduction to be approved.
- The amount outstanding must not be the result of wilful refusal to pay or culpable neglect.
- In the case of an unoccupied property, it must not be the sole or main residence of a council taxpayer.

Details of the Council's discretionary Council Tax policy can be found at www.nuneatonandbedworth.gov.uk

If you require any assistance in completing this form, please contact the billing section on (024) 7637 6534 or email billing.section@nuneatonandbedworth.gov.uk

This application form should be completed and returned to:-

Revenues Manager, Nuneaton & Bedworth Borough Council, Town Hall, Coton Road, Nuneaton, CV11 5AA together with any supporting documentation. In the event that any requested information is not provided the application may be refused.

Address of property on which discretionary council tax discount is being claimed:

Applicants Name:
Address:
Post Code:
Telephone Number:
Email:
Council Tax Account Number:
Date of Birth:
National Insurance number:
Council Tax Account Reference (if known)

Name of individual(s) or organisation who is/are liable for Council Tax at the above property:

Name of individual(s) or organisation and address for correspondence:

Please note if you are making this application on behalf of somebody else you will need to provide a signed declaration from them that you have authority to act on their behalf.

- Do you have any other financial resources that you could rely on i.e. family or friends? If yes, please provide details.

- Are you in receipt of a state benefit and your entitlement has been reduced? If yes, provide details of your normal entitlement and the amount of the reduction.

- Do you have any debts? If so, please state what for and for how long you have had the debts and when the repayment period is due to end. Have you sought advice on how to clear your debts/registered your debts. You must provide proof.

- Please describe any hardship or special circumstances that you or members of your family are suffering, giving the date that these circumstances started, and if appropriate, a date when they might end.

- Is there a particular reason why your accommodation is suited to the needs of your family? YES/NO. if yes, please provide details.

- Have you been advised that bailiff or court action for non-payment of council tax is being considered?

- Have you sought advice on maximising your income e.g. benefit check. You may be entitled to disability Living Allowance or free school.

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Income	
	Weekly/Monthly
Wages/Salary (self)	
Wages/Salary (partner)	
Income Support	
Jobseekers Allowance	
Working Tax Credit	
Child Tax Credit	
Child Benefit	
ESA / Incapacity	
Sickness Benefit	
Pension Credits	
Works/Private Pension	
Child Maintenance Received	
Non-Dependant Contributions	
Armed Forces Pension	
DLA / PIP	
Universal Credit	
Other1 (give details)	
TOTAL INCOME	£

	Weekly/Monthly
Total Income	£
Total Essential Expenses	£
Total Non-Essential Expenses	£
EXCESS INCOME	£

SAVINGS Self	£
SAVINGS Partner	£
TOTAL	£

	Weekly / Monthly	
	Expenses	Arrears
ESSENTIAL		
Mortgage		
Second Mortgage/Secured Loan		
Council Rent		
Private Rent		
Council Tax		
Water Rates		
Gas		
Electricity		
Bank Loans - Secured		
Telephone (Include mobile)		
Ground Rent/Service Charges		
Building/Contents Insurance		
Life Insurance/Pension		
Housekeeping		
Clothing		
School Meals		
TV Rental/Licence		
Magistrates Court Fines		
County Court Judgements		
Child Maintenance Paid		
Road Tax		
Motor Insurance		
MOT		
Petrol / Diesel		
Public Transport		
Laundry		
Prescriptions		
Childminding		
Non-Domestic Rates		
Housing Benefit overpayments		
NON-ESSENTIAL		
Alcohol/Cigarettes		
Cable/Satellite TV		
Bank Loans - Unsecured		
Credit Cards		
HP Agreements (give details).....		
Catalogue (give details).....		
Other 1(give details).....		
Other 2(give details).....		
TOTAL EXPENSES	£	£

Amount of discretionary council tax discount you wish to apply for

What is amount (£) that you wish to apply for?
What period of council tax liability does your application covers?

DECLARATION

YOU AND YOUR PARTNER MUST READ THIS CAREFULLY BEFORE YOU SIGN

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, getting them to sign this form should allow us to process your claim more quickly, but they do not have to sign it. If your partner does sign this form, they are signing to agree to the declaration shown below.

IMPORTANT, it is vital that you fully read and understand the declaration below before you sign and date it. If you do not understand any part of it, please ask a member of the Benefit Section for further guidance.

I understand that this my claim for Discretionary Hardship Payment.

I declare that the information I have given on this form is correct and complete as far as I know and believe.

I know that I must tell the authority in writing straight away of any changes in circumstance.

I give permission for you to check the information I have given with any of the sections of the Council, the Rent Officer, other Councils and Benefit Authorities.

EVIDENCE

We will require liable parties of the household to provide the following information:

- Bank Statements – the last two months of Bank Statements for all the accounts held. If you have your money paid into another person’s account, we will need to see proof of this.
- Evidence of debts – rent statement, utilities bill, loans, hire purchase agreements, credit card statement and any other debts.
- Evidence of earnings (Payslip) or other types of income e.g. self-employment.
- Evidence of exceptional circumstances that may be causing additional pressures to your household e.g. such as letters of support as letters of support from social or health care professionals, medical notes from GP’s or hospitals, homeless assessments, letters of support workers and other organisations.

You will be emailed a link to upload documents at a later time if you do not have them now.

Billing.section@nuneatonandbedworth.gov.uk

(There must be evidence of financial hardship or how an individual has been adversely affected to justify a reduction to Council Tax liability) Please provide reasons that you are unable pay your council tax liability include with your application form your last 3 months bank statements and full financial breakdown of your income and expenditure in order that your application may be assessed.

DECLARATION

I apply for discretionary council tax discount. I declare that the information given on this form is correct. I authorise the Revenues section to make any enquiries necessary to verify the information stated. I undertake to notify the Revenues section immediately if there is any change of circumstances that may affect my entitlement to discretionary council tax discount. I understand that I must continue to pay any amount of council tax that falls due whilst this application is pending.

Signed

Name of Signatory (BLOCK CAPITALS)

Capacity in which signed

Date/...../.....

Email address

Daytime telephone number