

COUNCIL TAX APPLICATION FOR PATIENTS IN HOSPITAL DISCOUNT

Please read the Guidance Notes and Data protection Statement before completing this form

For the purpose of calculating the number of residents in a dwelling, a person over the age of 18 who is a hospital patient shall be disregarded if the individual has his or her sole or main residence in a hospital.

1. APPLICANT

Name.....

Address.....

.....Reference Number.....

2. Please enter the details of individual(s) who you consider qualifies under the definition shown in the guidance notes.

SURNAME	FORENAMES (in full)	ADDRESS OF HOSPITAL	DATE OF ADMISSION

DECLARATION

I declare that the information above is true and complete to the best of my knowledge. I undertake to notify the Council immediately if I believe that I am no longer eligible for a reduction in respect of the application.

Signature of Applicant.....Date.....

GUIDANCE NOTES

STATUS DISCOUNT: PATIENTS IN HOSPITAL

A person shall be disregarded if their sole or main residence is in either :-

- A NHS hospital in England, Wales or Scotland *

OR

- A military hospital.

* this includes hospital trusts and private hospitals.

DATA PROTECTION STATEMENT

Your personal information will be held and used in accordance with the requirements of the Data Protection Act 1998.

This Authority is under a duty to protect the public funds that it administers and, to this end, may use the 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 or in receipt of public funds, solely for these purposes.