

SOUTH GLOUCESTERSHIRE COUNCIL

Chief Executive and Corporate Resources Department, Revenue Services, PO Box 1953, Bristol, BS37 0DB

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COUNCIL TAX: ANNEXE EXEMPTION QUESTIONNAIRE

The Government has decided that with effect from 1 April 1997, that where an annexe or similar self contained part of a property is occupied by an elderly or disabled relative of the residents living in the main residence then the annexe and its occupiers should be exempt from Council Tax.		
SECTION 1		
APPLICANTS NAME:	PROPERTY REFERENCE: (ctrel)	
APPLICANTS ADDRESS:		
POSTCODE:	DAYTIME TELEPHONE NO:	
SECTION 2		
ADDRESS OF ANNEXE		
SECTION 3		
HOW MANY PEOPLE ARE RESIDENT IN THE ANNEXE?	<input type="text"/>	
NAME(S) OF THE OCCUPANTS		
DATE THEY MOVED INTO ANNEXE		
ARE ANY OF THE RESIDENTS IN THE ANNEXE (Please tick appropriate box)		
OVER 65	YES <input type="checkbox"/>	NO <input type="checkbox"/>
DISABLED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
SEVERELY MENTALLY IMPAIRED (DEFINITION OVERLEAF)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
SECTION 4 IF ANY OF THE PEOPLE AT SECTION 3 ARE SEVERELY MENTALLY IMPAIRED, PLEASE STATE WHO AND WHICH QUALIFYING BENEFIT THEY RECEIVE. (LIST OF QUALIFYING BENEFITS OVERLEAF)		
NAME:	BENEFIT:	
NAME:	BENEFIT:	

SECTION 5 IF ANY OF THE PEOPLE AT SECTION 3 ARE DISABLED, PLEASE STATE WHO, AND THE NATURE OF THE DISABILITY

NAME:	BENEFIT:
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NAME:	BENEFIT:
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SECTION 6

HOW ARE THE PEOPLE NAMED AT SECTION 3 (WHO RESIDE IN THE ANNEXE) RELATED TO THE PEOPLE WHO OCCUPY THE REST OF THE PROPERTY (i.e. grandparents etc.)?

SEVERELY MENTALLY IMPAIRED: A person is severely mentally impaired if they have a severe impairment of intelligence and social functioning which appears to be permanent and has been certified as such by a doctor. They must also be entitled to one of the following qualifying benefits:

Please tick the appropriate box or boxes:
 I declare that the qualifying person is entitled to:

- The care component of a disability allowance at the middle or higher rate
- Incapacity benefit
- A severe disablement allowance
- An unemployment supplement payable as an increase to disablement benefit?
- An employability allowance payable with war disablement pension
- Attendance allowance
- Constant attendance allowance at one of the four rates payable with disablement
- Income support disability premium on the grounds of incapacity to work
- An increase in the rate of disablement pension
- A disability working allowance

It may be necessary for the Council to see proof of the benefit paid, if this is the case, the Council will write to you.

SECTION 7 : DECLARATION BY APPLICANT

I declare that the information given on this form is true and accurate to the best of my knowledge and belief.

SIGNATURE:	DATE:
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If you are completing this form on behalf of someone else, please state in what capacity you act: i.e. appointee, power of attorney.