

Revenues Service  
P.O. Box 60  
Leeds LS2 8JR

Acct Ref No:

### **Council Tax - Claim for Reduction for Disabilities for**

If someone living at the above address is **permanently** disabled, you might be able to get a reduction in your Council Tax **if** one of the following three things applies:

- the disabled person uses a wheelchair indoors; **or**
- the property has a second bathroom (not just a toilet) or a second kitchen, needed by the disabled person; **or**
- the property has a room which the disabled person needs because of his/her disability (but not a kitchen, bathroom or toilet). The room must be essential or of major importance to the disabled person's well-being because of the nature and extent of their disability. (For example, a room being used for storing dialysis equipment.)

**Please note:** stairlifts and handrails do not, on their own, qualify for the reduction – one of the three things above **must** apply or the reduction cannot be granted.

To claim the reduction, please fill in the form on the back of this letter and send it back to us.

If your claim is successful, we will reduce your Council Tax to the amount payable for a property in the band just below yours. If you are already in the lowest band, band A, we will reduce it by about 15%. We will also send you an adjustment notice, which will show the amount of the reduction (called 'Disabled Relief') and your new instalments. If we cannot grant the reduction, we will contact you to explain the reason.

You still need to pay your current bill whilst you are waiting to hear about your claim.

If you have any questions, please contact us.



## Claim for Reduction for Disabilities

Please give the address you are claiming the Reduction for

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Please give your Council Tax account number: .....

Please list all the people who live at the above address who are 18 or over.

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.....  
.....

Please give the name of the disabled person who lives there (and date of birth, if under 18)

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What is the person's disability? .....

Is the disability permanent? Yes / No

Does the person use a wheelchair inside the property? Yes / No

If yes, please give the date the person started using a wheelchair indoors (if this was after 1<sup>st</sup> April).....

Does the property have: (please tick all those which apply)

1. A room which the disabled person needs because of his/her disability

If so, please explain what the room is and what it is used for

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.....  
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Please give the date the person started using the room in this way (if this was after 1<sup>st</sup> April).....

2. A second bathroom or kitchen which is essential to meet the needs of the disabled person.

(Please do **not** tick this box if there is just a second toilet or sink)

Please give the date the second bathroom/kitchen was added (if this was after 1<sup>st</sup> April)

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**Declaration - the person(s) named on the Council Tax bill must sign this declaration.**

The information I have given on this form is true and complete.

Signature:..... Date: .....

Please give your daytime telephone number in case we need to speak to you about this claim.....

*In line with Data Protection law, we may use information you give us to prevent or detect fraud or other crimes. We may also share it with other Council services or public organisations if they need it in order to carry out their legal duties.*