

## COUNCIL TAX – PERSONS RECEIVING CARE ELSEWHERE

Please complete this form and return it to:

Rother District Council, Post Handling Service, PO Box 10665, Nottingham NG6 6DZ

Telephone: (01424) 787000 Fax: (01424) 787755

E-mail: [revenuesandbenefits@rother.gov.uk](mailto:revenuesandbenefits@rother.gov.uk)

Web: [www.rother.gov.uk/counciltax](http://www.rother.gov.uk/counciltax)



Please read the notes overleaf before completing this form and ensure the requested evidence is enclosed.

|   |                      |
|---|----------------------|
| Full name of person in receipt of care:   |                      |
| Council Tax reference number:   |                      |
| Address which is now unoccupied:  |                      |
| Date the property was vacated:  |                      |
| Address where care is being received:   |                      |
| Please state why personal care is required:<br>Old Age.....Yes/No<br>Disablement.....Yes/No<br>Illness.....Yes/No<br>Alcohol/Drug dependence.....Yes/No<br>Mental Disorder.....Yes/No |                      |
| <b>Please elaborate on why personal care is required and what personal care is provided:</b>  |                      |
| Is anyone living at the vacated home address? Yes/No<br>If yes please provide their names and dates of occupation:  |                      |
| Signed:   | Print Name:<br>Date: |
| Telephone number:   |                      |
| Email address:  |                      |

**Any changes in circumstances should be notified to the council within 21 days.**

## **COUNCIL TAX – PERSONS RECEIVING CARE ELSEWHERE APPLICATION**

### **When is an exemption possible?**

If a property is left unoccupied because the person(s) previously living there has permanently moved to receive personal care elsewhere, (other than a residential home or hospital) you may apply for an exemption from Council Tax.

An exemption means that no-one has to pay Council Tax for that property.

### **Who can qualify for this exemption?**

You can be exempt if the person whom is being cared requires care for one of the following reasons:-

- Old age
- Disablement
- Illness
- Past or present alcohol or drug dependence
- Past or present mental disorder

### **How do I apply?**

Please return this Person Receiving Care Elsewhere application form with the requested evidence.

### **What evidence do I need to submit?**

To enable the Council to verify entitlement to this reduction you must provide evidence that the applicant has moved to receive care due to one of the above reasons. This evidence may include (but is not limited to):

- Proof that the carer where the applicant is now residing is in receipt of Carers Allowance for the applicant,
- Evidence that the applicant is in receipt of the Care Component of Disability Living Allowance,
- A signed declaration from the applicants medical practitioner, confirming that the applicant requires care which can better be provided at their new address

We cannot assess your claim for this discount unless the above evidence has been provided.

This information can be made available in large print, Braille, audio/CD or in another language upon request.

Please telephone: 01424 787000 or

Email: [revenuesandbenefits@rother.gov.uk](mailto:revenuesandbenefits@rother.gov.uk)

### **Data Protection Act – How we collect and use the information you give us.**

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations which handle public funds.