



NORTH WARWICKSHIRE BOROUGH COUNCIL  
THE COUNCIL HOUSE, SOUTH STREET,  
ATHERSTONE, WARWICKSHIRE, CV9 1DE

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## APPLICATION FORM FOR COUNCIL TAX DISCOUNT - CARER

This form constitutes an application under Regulation 14 of the Council Tax (Administration & Enforcement) Regulations 1992 (SI 1992 No. 613).

**Please read the guidance notes overleaf and the declaration below then complete and sign the form, if appropriate, and return using the envelope provided.** You have advised that some or all of the residents of the address below are carers. In this case they may be disregarded for Council Tax Discount purposes and you, the liable person, may be entitled to discount from your Council Tax bill. If the details are verified and discount is awarded, a revised bill will be issued. In the meantime, bills previously issued must be regarded as correct and due for payment as requested.

Full Property Address :

How many people aged 18 or over (including yourself) live at the above address?

Name of person  
receiving care :

Date of  
birth :

National  
Insurance No :

Relationship  
to carer :

Type of pension / allowance received (please attach proof of entitlement) :

Name of carer :

Date caring started :

No. of hours worked  
per week as a carer :

Weekly gross pay  
as a carer :

Employer of carer :

### DECLARATION:

I declare that the information given above is correct to the best of my knowledge. I verify that I am the person responsible for the above property and hereby claim any Council Tax Discount available as a result of this application. I undertake to advise the Director of Finance within 21 days of any change in circumstances affecting my entitlement, or if responsibility for the property passes from me. I understand that it is a criminal offence to receive discount to which I am not entitled and I also understand that it is an offence to give false information. The latter could make me liable for a penalty of £50 for a first offence and £200 for each subsequent offence.

Signed :

Date:

Full Name :

Telephone - Day:  
Evening:

e-mail:

## **COUNCIL TAX DISCOUNT - GUIDANCE NOTES**

### **CARERS**

There are two types of carers for which Council Tax disregarded status can be applied. The criteria for each type are set out below. If either description applies to a member of your household please complete and return the form.

### **CARER – EMPLOYED**

For this category, the carer must be :

- 1) Either –
  - a) Providing care on behalf of a ‘relevant body’, i.e. a local authority, the Common Council of the City of London, the Council of the Isles of Scilly, the Crown, or a charitable body; or
  - b) Employed by the care recipient to whom he or she was introduced by a charitable body.
- 2) Engaged or employed to provide care or support for at least 24 hours per week;
- 3) In receipt of not more than £36.00 remuneration per week from this engagement or employment;
- 4) Resident in premises provided by the relevant body (see 1(a) above), or by his or her employer, for the better performance of his or her work.

**PLEASE PROVIDE A LETTER FROM YOUR EMPLOYER CONFIRMING THE ABOVE.**

### **CARER – OTHER**

For this category, the carer must be :

- 1) Providing care to someone who is entitled to :
  - a) Higher rate Attendance Allowance;
  - b) Highest rate of Care Component of Disability Living Allowance;
  - c) Increase in the rate of Disablement Pension; or
  - d) Increase in Constant Attendance Allowance.
- 2) Resident in the same dwelling as the care recipient;
- 3) Providing care for at least 35 hours a week on average;
- 4) Somebody who is not:
  - a) The spouse (or partner if living together as husband and wife) of the care recipient, or
  - b) The parent of the care recipient if he or she is under 18 years of age.

**PLEASE PROVIDE PROOF OF THE CARE RECIPIENT’S ENTITLEMENT TO THE ALLOWANCE OR PENSION FROM THE LIST SHOWN IN (1) ABOVE.**