COUNCIL TAX Application for Co (Severe Mental Ir	ouncil Tax Discount/Exemption npairment)	S O U T H H O L L A N D DISTRICT COUNCIL
	Account Number: Property Reference: Please: Use BLACK CAPITAL LETTERS Readthe guidance notes carefully befor Please complete Sections 1 to 4, then proof of benefit and stamped, address impaired person's doctor to complete If you need any help completing this form Council Tax Office on 01775 761161	pass the form, sed envelope to the Section 5
	rely Mentally Impaired Person Is below regarding the severely mentally impaired person.	

How many people aged 18 and over live in the property?

From what date has the severely mentally impaired person lived in this property?

Address:

Telephone number:

Date of birth:

Email:

If you are completing this form on behalf of someone else, please give us your full name and address.

Name:					
Address:					
Relationship:					
Telephone number:					
Details of anyone who has the authority to discuss on behalf of the severely mentally impaired person.					
Name:					
Name: Address:					
Address:					

Section 2: Benefit Details

Please see the list below of the qualifying benefits. Please indicate with a tick (\checkmark) which benefit the severely mentally impaired person is entitled to.

Universal Credit including the limited capability for work related activity element
Personal Independence Payment - daily living component paid at the standard or enhanced rate
Employment and Support Allowance
Severe Disablement Allowance
Disabled Persons Tax Credit
Disability Living Allowance - care component paid at the middle or highest rate
An increase in the rate of Disablement Pension where constant attendance is needed
Income-based Job Seeker's Allowance paid to a partner which includes a disability premium or higher pensioner premium.
Attendance Allowance
Unemployability Supplement
Income Support where the appropriate amount includes a disability premium
Constant Attendance Allowance paid under the personal injuries or war pensions scheme
Unemployability Allowance paid under the personal injuries or war pensions scheme
Would have been entitled to one of the above benefits if they had not reached pensionable age

Please provide proof of all qualifying benefits for the severely mentally impaired person - either a copy of your letter of entitlement or a screen shot showing your entitlement.

If proof is not provided, it will not be possible to process your application.

Section 3: Direct Debit

Your change in circumstances may mean that we have to create a new Council Tax account. If you currently pay by Direct Debit and would like this to continue, please tick this box:

Section 4: Declaration

I declare that the information given is correct to the best of my knowledge and I give authorisation for a Doctor to provide the information in Section 5.

If you are completing this form on behalf of the severely mentally impaired person, please complete this section below with your information.

Name:	Date:	
Signature:	Telephone No:	
Email:		

If after you have returned this form, there are any changes to your circumstances, please inform the Council Tax Team within 21 days. Not declaring a relevant change could result in you getting a financial penalty.

WARNING: If you deliberately provide false information or fail to give prompt notification of a change of circumstances, you could be prosecuted or receive a financial penalty under Section 3 of the Local Government Finance Act 1992 or the Council Tax Reduction Schemes (Detection of Fraud and Enforcement) (England) Regulations 2013.

Section 5: Doctor's Certificate

The Doctor must fill in this section. Unfortunately, we cannot be responsible for any charge made to fill in this certificate.

On completion, please forward the form along with any supporting documents to: South Holland District Council, PO Box 8, Spalding, Lincolnshire PE11 2XQ

- 2. Does the person named in Section 1 have a severe impairment of social functioning?..... Yes 🗌 🛛 No
- 4. From what date has the person named in Section 1 had these impairments?.

A person is severely mentally impaired for the purposes of the Act if they have a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

Doctor's signature:	Date:	
Doctor's full name:		
Surgery/Hospital address:		
Surgery Stamp:		

Guidance Notes - Severe Mental Impairment

Council Tax is based on the assumption of two adults (people aged 18 or over) living in a property. 50% relates to the property element and 50% relates to the personal element, however certain people can be disregarded when considering the number of adults in the property.

The effect of disregarding certain adults may reduce your Council Tax charge by 25%, 50% or 100%.

We can disregard a person for Council Tax if they are severely mentally impaired. A person is classed as severely mentally impaired if they have "a severe mental impairment of intelligence and social functioning (however caused) which appears to be permanent" and this has been confirmed by a registered medical practitioner such as a GP. In addition, the severely mentally impaired person should be in receipt of one of the qualifying benefits listed under Section 2 of this form, or entitled to one of the qualifying benefits before reaching pensionable age.

A further discount may be available if you have a carer living with you or someone else who may be 'disregarded' for Council Tax purposes. If you are unsure, please see our website or contact the Council Tax office on 01775 761161.

If you are unsure if a change in circumstances affects your Council Tax, please contact us to discuss.

Privacy Information

Your Council Tax information will be processed by Public Sector Partnership Services (PSPS) on behalf of the data controller, South Holland District Council. We require this information from you to allow us to fulfil our statutory duty for Council Tax collection, as defined in the Local Government Finance Act (1992), and our legal basis for processing your data is to fulfil this legal obligation. We may also share this information with departments within the council or other public bodies responsible for gathering statistical information, auditing or administering public funds, and with other suppliers we commission to support us with our duties. Please refer to our website www.sholland.gov.uk/privacy for full details relating to the processing of your information. This will include an explanation of your rights as a data subject, who we share information with and why, contact details (including for Data Protection Officers), and an explanation of our plans to retain your information.



SHDC, PO Box 8, Spalding, Lincolnshire PE11 2XQ Website: www.sholland.gov.uk Email: counciltax@sholland.gov.uk | Tel: 01775 761161

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