



An Application Form for:

- Council Tax Reduction Scheme • Second Adult Rebate



Inverclyde Council, Wallace Place, Greenock PA15 1LZ

www.inverclyde.gov.uk/advice-and-benefits





Please read these important notes before you fill in this form

How to fill in this form

Please answer all of the questions that apply to you. If you do not answer the questions it will take us longer to work out and pay your Council Tax Reduction. Please contact us if you need any help or advice or if you would like us to send someone to see you in your own home. We will be happy to help you.

Please send this form back to us as soon as you can. If you do not, you may lose some Council Tax Reduction.

You should send this form back to us even if you are waiting for proof of your income or any other details. You can send us the proof or details later but please make sure that you send original documents and put your name and address on anything you sent to us. **If you would like someone to visit you at home to see the proof, please contact us so that we can arrange this for you.**

When you have filled in this form, you can hand it in or send it the address shown on the front of this form.

Benefits Office Freephone: 0800 013 1375
email: benefitenquiries@inverclyde.gov.uk
www.inverclyde.gov.uk

How we pay your benefit

We aim to tell you what your Council Tax Reduction will be within 14 days of receiving your completed form and all the proof we need. If you do not send the proof we need, we cannot pay your Housing Benefit and/or Council Tax Reduction.

Council Tax Reduction helps you to pay your Council Tax if you are on a low income. Council Tax Reduction is paid straight to your **Council Tax account**.

Second Adult Rebate helps you to pay your Council Tax if you do not live with a partner, but there are other adults who live in your home who have a low income (before tax, National Insurance and any other deductions are taken). **Second Adult Rebate** is paid straight to your **Council Tax account**. If you want to claim Second Adult Rebate but do not want to claim any of the other benefits, make sure your name and address are on this form, and fill in sections 1, 3 and 16 only. However, if you fill in all of the form we can tell you about other benefits and/or Council Tax Reduction you may be able to get.

Inverclyde Council is under obligation to properly manage public funds. Accordingly, information that you have provided on this form may be used to prevent and detect fraud, and may also be shared for the same purpose with The Scottish Government, public bodies or other organisations that handle public funds.





Part 1 About you and your partner (continued)

You

Your Partner

What is your nationality?

If your nationality is not British on what day did you last enter and apply to stay in the UK? The UK is England, Northern Ireland, Scotland and Wales.

If you are aged 16 or 17, Have you recently left Local Authority Care?

No
Yes

No
Yes

Have you or your partner claimed Council Tax Reduction before?

No
Yes When did you claim?

No
Yes When did they claim?

 / /
 / /

What address did you claim for?

What address did they claim for?

Are you or your partner in hospital at the moment?

No
Yes When did you go in?

No
Yes When did they go in?

 / /
 / /

When do you expect to come out?

When do they expect to come out?

 / /
 / /

Does anyone get Invalid Care Allowance for looking after you or your partner?

No
Yes

No
Yes

If the answer is yes please provide their details.

Name
Address

Name
Address

Please tick if you or your partner are:

- a student
- Is your course
- Which level is your course?
- a student nurse
- an apprentice
- on youth training
- in legal custody
- severely mentally impaired
- Certified/Registered Blind
- long terms sick or disabled and incapable of work

Full/Part Time*
*Please delete as appropriate

Full/Part Time*
*Please delete as appropriate

NC/HNC/HND/Degree or other
(please specify

NC/HNC/HND/Degree or other
(please specify

We will contact you if we need any more information





Part 2 About children

You may be able to get extra Council Tax Reduction for children you get Child Benefit for if they normally live with you and they are:

- under 16
- aged 16 or 17 and registered for work or youth training
- aged 16 or 17 or over, but still under 19 and in education doing a course not higher than SCE Higher level or GNVQ (advanced).

Do you want to claim/apply for any children?

No Go to Part 3.

Yes Tell us about the children you want to claim for. If you want to claim for more than 3 children, use a separate sheet of paper.

If you are sending a separate sheet of paper, tick this box.

	First child	Second child	Third child
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First and Middle names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
What is the child's sex?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
Usual address if different from yours	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them? <i>We need to see proof of this.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the child certified blind or getting Disability Living Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Do you pay any childminding costs for this child? <i>For example, to a childminder, nursery or after school club.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>How much do you pay a week?</i>	<i>How much do you pay a week?</i>	<i>How much do you pay a week?</i>
	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<i>If Yes, we will send you a separate childcare form. We will process your current application without these details, but it is in your own interest to return this form as soon as possible.</i>	We need to see proof	We need to see proof	We need to see proof





Part 3 About other people who live with you

Do any adults normally live with you and your partner

By adults we mean people over 16 who nobody gets Child Benefit for.

No Go to Part 4.

Yes Tell us about all the adults, except for your partner, who usually live with you. If you want to tell us about more than 3 people please provide their details in the notes box at the back of this application form.

	First person	Second person	Third person
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First and Middle names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Their relationship to you <i>For example, aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner or friend.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do they get Income Support, income-based Jobseeker's Allowance or income related Employment and Support Allowance?

No
Yes

No
Yes

No
Yes

Do they get Universal Credit?

No
Yes

No
Yes

No
Yes

Do they get Disability Living Allowance/Personal Independence Payment or Attendance Allowance, or are they Certified Blind?

No
Yes

No
Yes

No
Yes

Are they a full time student, a student nurse, a case worker, an apprentice or in youth training?

No
Yes

No
Yes

No
Yes

We need to see proof of this.





Part 3 About other people who live with you (continued)

	First person	Second person	Third person
Do they pay rent to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If yes, when did they go into custody, and when are they expected to come out?	<i>In</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	<i>In</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	<i>In</i> <input type="text"/> / <input type="text"/> / <input type="text"/>
	<i>Out</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	<i>Out</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	<i>Out</i> <input type="text"/> / <input type="text"/> / <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> <i>When did they go in?</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> <i>When did they go in?</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> <i>When did they go in?</i> <input type="text"/> / <input type="text"/> / <input type="text"/>
	<i>When are they expected to come out?</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	<i>When are they expected to come out?</i> <input type="text"/> / <input type="text"/> / <input type="text"/>	<i>When are they expected to come out?</i> <input type="text"/> / <input type="text"/> / <input type="text"/>
	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do they normally work for 16 hours a week or more?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> <i>Tell us their earnings before deductions for things like tax and National Insurance.</i> <input type="text"/>	Yes <input type="checkbox"/> <i>Tell us their earnings before deductions for things like tax and National Insurance.</i> <input type="text"/>	Yes <input type="checkbox"/> <i>Tell us their earnings before deductions for things like tax and National Insurance.</i> <input type="text"/>
	<i>We need to see proof of their earnings. (eg wageslips)</i>	<i>We need to see proof of their earnings. (eg wageslips)</i>	<i>We need to see proof of their earnings. (eg wageslips)</i>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they have any other income at all? <i>Working Tax Credit, Child Benefit, etc.</i>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> <i>Tell us their other income before deductions for things like tax and National Insurance.</i> <input type="text"/>	Yes <input type="checkbox"/> <i>Tell us their other income before deductions for things like tax and National Insurance.</i> <input type="text"/>	Yes <input type="checkbox"/> <i>Tell us their other income before deductions for things like tax and National Insurance.</i> <input type="text"/>
	<i>We need to see proof of their income</i>	<i>We need to see proof of their income</i>	<i>We need to see proof of their income</i>
	<input type="text"/>	<input type="text"/>	<input type="text"/>





Part 5 About being self-employed

Are you or your partner self-employed?

No

Go to **Part 8**.

Yes

Answer the questions on this page.

You must send us your trading accounts for the last financial year.

If you have only recently set up the business and do not have a full year's accounts, we will need to see some other proof of your income.

You

Your Partner

What kind of work do you do?

When did the business start?

 / /
 / /

What is the business name and address?

 Postcode

 Postcode

Are there any other partners in the business?

No

Yes Tell us their name and address

 Postcode

No

Yes Tell us their name and address

 Postcode

How many hours a week do you work?

Do you get a Business Start-Up Allowance?

No

Yes How much?

£

How often?

Every

No

Yes How much?

£

How often?

Every

Do you pay into a private pension scheme?

No

Yes How much?

£

How often?

Every

No

Yes How much?

£

How often?

Every

We must see proof of any earnings before we can decide how much Housing Benefit and/or Council Tax Reduction you can get. Read the checklist at Part 14 to see what you can use as proof.





Part 6 About working for an employer

Do you or your partner work for an employer?

No

Go to Part 9.

Yes

Answer the questions on this page.
If you work for more than one employer, tell us about all the employers.
Please provide their details in the notes at the back of this application form.

You

Your Partner

What kind of work do you do?

What is your employer's name and address?

 Postcode

 Postcode

When did you start this job?

 / /
 / /

Are you employed for a limited period?

No

Yes When will you finish?

 / /

No

Yes When will you finish?

 / /

How often do you get paid?

 Every

 Every

How much do you get paid?

 £

 £

When was your last pay rise?

 / /
 / /

How many hours a week do you work?

Are you getting Statutory Sick Pay (SSP), Statutory Maternity Pay (SMP), Statutory Paternity Pay (SPP), or Statutory Adoption Pay from your employer at the moment?

No

Yes

No

Yes

When did this start?

 / /
 / /

Are you getting any other sick, maternity, paternity or adoption pay from your employer at the moment?

No

Yes

No

Yes

When did this start?

 / /
 / /

Do you pay into a private pension scheme?

No

Yes How much?

 £

How often?

 Every

No

Yes How much?

 £

How often?

 Every

We must see proof of any earnings before we can decide how much Housing Benefit and/or Council Tax Reduction you can get. Read the checklist at Part 14 to see what you can use as proof. If you get tips or bonuses, tell us about these in Part 13.





Part 7 About any other work

Do you or your partner do any other work at all?
This could be voluntary work or any other work, even if it is not paid work?

No *Go to Part 10.*

Yes *Answer the questions on this page.*

You

Your Partner

What kind of work do you do?

What is the name and address of the person you do this work for?

Postcode

Postcode

When did you start this work?

 / /
 / /

Do you get paid?

If you only get expenses or tips, still tick "Yes" and give details.

No

Yes *How much?*

£

How often?

Every

No

Yes *How much?*

£

How often?

Every

We must see proof of any earnings before we can decide how much Housing Benefit and/or Council Tax Reduction you can get. Read the checklist at Part 14 to see what you can use as proof.





Part 8 About benefits and pensions

Are you or your partner getting any benefits or waiting to hear about benefits you have claimed?

Read the list of benefits below and tell us about any you or your partner are getting now or have claimed.

- Universal Credit
- Attendance Allowance
- Disability Living Allowance/Personal Independence Payment
- Disabled Person's Tax Credit
- Guardian's Allowance
- Incapacity Benefit
- Contribution-based Employment and Support Allowance
- Industrial Death Benefit
- Contribution-based Jobseeker's Allowance
- Maternity Allowance
- Retirement Pension
- Pension Credits
- Severe Disablement Allowance
- War Disablement Benefit, War Pension or War Widow's Pension
- Tax Credits
- Statutory Sick Pay, Statutory Maternity Pay, Statutory Paternity Pay or Statutory Adoption Pay

If you are getting or have claimed any benefit that is not listed, tell us about it on the notes box at the back of this application form.

No Go to Part 11.

Yes Tell us about the benefits below.

	You	Your Partner
The name of the benefit	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<i>Waiting to hear</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Getting now</i>	<input type="checkbox"/> How much?	<input type="checkbox"/> How much?
	£ <input style="width: 80%;" type="text"/>	£ <input style="width: 80%;" type="text"/>
	<i>How often?</i>	<i>How often?</i>
	<input style="width: 80%; border: 1px solid #ccc;" type="text" value="Every"/>	<input style="width: 80%; border: 1px solid #ccc;" type="text" value="Every"/>
The name of the benefit	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<i>Waiting to hear</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Getting now</i>	<input type="checkbox"/> How much?	<input type="checkbox"/> How much?
	£ <input style="width: 80%;" type="text"/>	£ <input style="width: 80%;" type="text"/>
	<i>How often?</i>	<i>How often?</i>
	<input style="width: 80%; border: 1px solid #ccc;" type="text" value="Every"/>	<input style="width: 80%; border: 1px solid #ccc;" type="text" value="Every"/>
The name of the benefit	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<i>Waiting to hear</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Getting now</i>	<input type="checkbox"/> How much?	<input type="checkbox"/> How much?
	£ <input style="width: 80%;" type="text"/>	£ <input style="width: 80%;" type="text"/>
	<i>How often?</i>	<i>How often?</i>
	<input style="width: 80%; border: 1px solid #ccc;" type="text" value="Every"/>	<input style="width: 80%; border: 1px solid #ccc;" type="text" value="Every"/>





Part 9 About other money coming in

Do you or your partner, or any children you are claiming for, have any money coming in that you have not already told us about on this form?

This includes occupational pensions, maintenance or child support for you, your partner or any of the children you have told us about on this form; and any cash payments. Also tell us about any money you get from people living in your house as boarders, lodgers or subtenants. You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust.

No Go to Part 12.

Yes Answer the questions on this page.

Other money 1

What is the money for?

Who gets it?

How much do they get?

 £

How often?

 Every

Other money 2

What is the money for?

Who gets it?

How much do they get?

 £

How often?

 Every

Other money 3

What is the money for?

Who gets it?

How much do they get?

 £

How often?

 Every

Does anyone owe money to you, your partner, or to any children you are claiming for?

No

Yes What for?

How much?

 £

We must see proof of any earnings before we can decide how much Housing Benefit and/or Council Tax Reduction you can get. Read the checklist at Part 14 to see what you can use as proof.



Part 10 About Bank Accounts

Do you or your partner have any bank accounts?

No

Yes

*Tell us about **bank accounts**. If there are more than 2 bank accounts, tell us about the others on the notes box at the back of this application form.*

Even if you have no savings, we still need to know about any accounts you have.

Name of bank?

Whose name is the account in?

Account number?

How much is in the account?

 £

Name of bank?

Whose name is the account in?

Account number?

How much is in the account?

 £

Do you or your partner have any building society accounts?

No

Yes

*Tell us about **building society accounts**. If you have more than 2 building society accounts, tell us about the others on a separate piece of paper and sent it with this form.*

If you are sending a separate piece of paper, tick this box.

Even if you have no savings, we still need to know about any accounts you have.

Name of building society?

Whose name is the account in?

Account number?

How much is in the account?

 £

Name of building society?

Whose name is the account in?

Account number?

How much is in the account?

 £



Part 10 About Post Office Accounts, capital, savings and investments

Do you or your partner have any post office accounts?

This includes savings accounts and Girobank accounts.

No

Yes

*Tell us about **post office accounts**. If there are more than 2 post office accounts, tell us about the others on the notes box at the back of this application form.*

Type of account?

Account number?

Whose name is the account in?

How much is in the account?

£

Type of account?

Account number?

Whose name is the account in?

How much is in the account?

£

Do you or your partner have any premium bonds?

No

Yes Value

£

Do you or your partner have any National Savings Certificates?

No

Yes

Issue number

Value of each certificate

£

How many?

Issue number

Value of each certificate

£

How many?

If you have more than two, please bring all your certificates into the office.

Do you or your partner have any stocks, shares, bonds or unit trusts?

No

Yes

Company name

How many?

Company name

How many?



Part 12 Checklist

We must have **original** documents, not copies.

If you do not provide all the proof we need, we might not be able to pay you any Council Tax Reduction. We need the same proof for your partner, if you have one, and for any other adults living in your home.

If you cannot send the proof we need at the moment, send the form back to us now and send the proof later. We can start to process your claim, but we will not be able to pay you any Council Tax Reduction until we have all the proof.

Please bring in or send in any evidence in support of your claim, to this office. We will take the details we need and give you the documents back straight away. If you cannot get into the office, phone us for more advice.

Proof of Identity

Such as a birth certificate, marriage certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit, EEC identity card or recent gas or electricity bill. We need to see at least 2 of these documents for you and your partner if you have one.

Proof of capital, savings and investments

Such as all your bank, building society or post office statements and passbooks, or certificates for premium bonds, National Savings Certificates, ISAs, stocks, shares and unit trusts. We need to see proof of any interest or dividends you get on investments and savings.

Proof of earnings

This means your last 5 payslips if you are paid every week, your last 3 payslips if you are paid every 2 weeks, or your last 2 payslips if you are paid every month. We will contact your employer if you do not have these payslips. If you or your partner are self-employed, we need to see your accounts for the last financial year or, if you have been trading for less than 6 months, a summary of your trading records so far.

Proof of other income

Such as pension slips from a former employer or a letter from the court showing how much maintenance you are getting. We need to see proof of any money people pay you for board and lodgings.

Proof of benefits, tax credits, allowances or pensions

Such as award notices or letters from Jobcentre Plus, The Pension Service or HM Revenue and Customs confirming how much you get. If you do not have proof, let us know straight away. Please do not send order books through the post.

Proof of private rent and tenancy

Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord.

Proof of other money paid out

Such as letters about student grants or maintenance, agreements or receipts from registered child carers.

If you are divorced, please provide divorce papers.

If you are separated please provide legal proof of this, eg lawyer's letter of confirmation.

Part 14 Declaration

Benefits Office Freephone 0800 013 1375
 email: benefitenquiries@inverclyde.gov.uk
www.inverclyde.gov.uk

Even if someone else has filled in this form for you, you must sign this declaration if you can.
 If you have a partner, they must sign this declaration as well.

Please read this declaration carefully before you sign and date it.

I understand that:

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my application for Council Tax Reduction. You may check some of the information from other sources within the Council and other councils.
- You may use any information I have provided in connection with this and any other/or application to Council Tax Reduction that I have made or may make. You may give some information to The Scottish Government and to other organisations, if the law allows this.
- I agree to act as the claimant for the purposes of the the applicant for the purposes of the Council Tax Reductions (Scotland) Regulations Reg 82, unless given the circumstances of my household it is beneficial for my partner to act as claimant or applicant. In which case, I allow the council to decide on who is claimant and/or applicant and who is the partner, if as a consequence of the council deciding on who is the claimant and/or applicant I am no longer the claimant or applicant, my partner agrees to accept the legal rights and responsibilities of claimant and/or applicant.
- I know I must let the Council Tax Reduction Section of Inverclyde Council know about any change in my circumstances which might affect my council tax reduction, such as changes to who shares my home with me and changes to my income and that of people who live with me.
- I declare the information I have given on this form is correct and complete.

Signature of applicant

Date

 / /

Partner's Signature

Date

 / /

If this form has been filled in by someone other than the person applying:
 Please tell us why you are filling in this form for the person applying.

Name of the person who filled in the form

Address of the person

Signature of the person

Relationship to the person applying

Date

 / /



If you need to contact us:

**Enquiries in person:
Inverclyde Council
Revenues & Customer Services
Clyde Square
Greenock
PA15 1LY**

Telephone: 0800 013 1375

**Opening Times: Monday – Thursday 8.45am – 4.30pm (excluding Wednesday)
Wednesday 11.00am – 4.30pm
Friday 8.45am – 3.45pm**

Inverclyde
council

**Inverclyde Council
Wallace Place
Greenock
PA15 1LZ**

