

PEOPLE WITH
ENDURING MENTAL ILLNESS

Discount claim form

Name

Address

.....

.....Post Code

CARLISLE
CITY COUNCIL



www.carlisle.gov.uk

**How TO
PAY LESS
COUNCIL
TAX**

Ref. No.

What is a discount for Enduring Mental Illness?

- Council Tax is a charge set by a local authority based on the valuation band that a property is placed in. The tax can however be reduced in certain circumstances if someone is entitled to a **Discount**.
- The full Council Tax bill is worked out on the assumption that there are 2 adults in a dwelling. If only one adult lives in a dwelling as his or her main home, the bill can be reduced by 25%. If no one is living in a dwelling as their main home, the bill can be reduced by 10%.
- Certain people are not counted when looking at the number of adults living in a dwelling. People who have an enduring mental illness are not counted.
- For Council Tax purposes, a person is treated as having an enduring mental illness if he or she suffers, for whatever reason, from severe impairment of intelligence which appears to be permanent. This will normally include people suffering from Alzheimer's disease and other similar illnesses.
- If a person living on their own has an enduring mental illness or all the occupants have an enduring mental illness an exemption may be granted.
- **For someone not to be counted, a certificate will be required from his or her doctor to say that he or she has an enduring mental illness.**
- The person must also be entitled to one of a number of benefits. These benefits are:-
 - Invalidity Pension
 - Attendance Allowance
 - Severe Disablement Allowance
 - The Care component of a Disability Living Allowance at the Higher or Middle rate:
 - An increased rate of Disablement Pension
 - Disability Working Allowance
 - Unemployability Supplement
 - Constant Attendance Allowance
 - Unemployability Allowance

- For example, if 2 people live in a household and one of them has an enduring mental illness, the bill will be worked out as if one lives there and will be reduced by 25%.

Want to know more?

- If you have any questions at all about Discounts for people with an enduring mental illness, just ask and we will be pleased to help you.
- Call in or write to the Revenues & Benefits Services, Civic Centre, Carlisle CA3 8QG.
- If you prefer, telephone us on **01228 817200** or Email: **ctax@carlisle.gov.uk**

**DO YOU WANT TO CLAIM?
if “YES” please go to the next part**

PLEASE NOTE

The claim must be made by the person liable to pay the bill (or by an agreed representative).

Information needed from you

- Please complete the relevant section below including the declaration and return the whole of this form to us.
- Please claim as soon as possible. The sooner you claim, the sooner your account can be checked to make sure that you are not paying too much.

Please give us your full name and address (if not shown)

How many people aged 18 or over live in your property

--

Please give the full name of the person with an enduring mental illness

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Is the person aged 18 or over

YES

NO

Please give the name of the persons doctor and the address of the surgery/hospital

Please place a tick against the box(es) relating to the benefit received by the person

- | | | | |
|--|--------------------------|---------------------------------|--------------------------|
| ● Invalidity Pension | <input type="checkbox"/> | ● Disability Working Allowance | <input type="checkbox"/> |
| ● Attendance Allowance | <input type="checkbox"/> | ● Unemployability Supplement | <input type="checkbox"/> |
| ● Severe Disablement Allowance | <input type="checkbox"/> | ● Constant Attendance Allowance | <input type="checkbox"/> |
| ● The care component of a disability living allowance at the higher or middle rate | <input type="checkbox"/> | ● Unemployability Allowance | <input type="checkbox"/> |
| ● An increased rate of Disablement Pension | <input type="checkbox"/> | | |

Please Remember:-

You need to provide proof of benefits received by either:

1. Getting a letter of benefit entitlement from the D.W.P. and sending it to me with this form.
2. By bringing the benefit/allowance books to my office for checking.
3. By returning this form with a photocopy of the allowance book pages showing the name of the recipient and the name of the benefit.

Declaration

I confirm that the information I have supplied in this claim is true and accurate and agree that the authority may make any reasonable enquiries to verify this

I will notify the authority immediately of any change in my circumstances that may affect my entitlement to the discount.

Signed: Date:

Full Name: Tel. No.:

PLEASE NOTE:

A penalty of £50 may be imposed where false or inaccurate information is provided or where there is a failure to supply any information requested by the City Council.

DATA PROTECTION - THE INFORMATION THAT YOU ARE ASKED TO PROVIDE MAY BE RECORDED ON COMPUTER AND IS SUBJECT TO THE DATA PROTECTION ACT 1984
We may allow access to Council Tax Information to other parties such as the Electoral Registration Officer, Police, Child Support Agency, Inland Revenue etc. as allowed by law.

What to do now

- Check that you have filled in the parts of the form which apply to you.
- Check that you have enclosed any items which you are required to send with your claim.
- Make sure you have signed the form.
- Take or send this form to the Revenues & Benefit Services, Civic Centre, Carlisle CA3 8QG.

PLEASE NOTE: Your Doctor needs to complete this next part.

This certificate is for use only for status discount in relation to Council Tax.

Please tick (✓) in the appropriate box:

I certify that in my opinion the person named overleaf as a mentally impaired person, is is not suffering from an enduring mental illness for the purposes of the Local Government Finance Act 1992

and has been since

Date	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Doctor's Signature

Doctor's Full Name

Doctor's Surgery/Hospital Address

Date

TO THE DOCTOR - When you have completed this part, please return the form in the envelope provided.