

**THIS FORM IS FOR YOU TO TELL  
THE COUNCIL TAX SECTION OF  
ANY CHANGE IN YOUR ADDRESS**

Enquiries to Council Tax Section.  
Telephone: (01228) 817200

Date of Issue

<b>SECTION 1 Name of the person(s) liable for Council Tax</b>		
Mr/Mrs/Miss/Ms	First Names	Surname(s)

**SECTION 2 Address you are leaving or have left**

Address:  
.....  
.....

Reference number if known:  
.....

The above property has been/will be left furnished/unfurnished (delete as appropriate)  
.....

If you were/are the owner of this property please state the name of the new owner:  
.....

If you were/are a tenant please state the name and address of the owner or the person you paid rent to:  
.....  
.....

Date of sale/end of tenancy  Date moved out

**SECTION 3 Address to which you have moved or are moving**

Address:  
.....  
.....

Reference number if known:  
.....

Please state the name(s) of the previous occupiers/owners and their new or correspondence address if known:  
.....

If you were/are a tenant please state the name and address of the owner or the person you paid rent to:  
.....  
.....

Date of purchase or start of tenancy  Date moved in

If you have or intend to move in after the date of purchase or start date of tenancy and the property was or will be unoccupied please indicate whether it was/will be furnished/unfurnished (delete as appropriate)

**SECTION 4 Name and address of solicitors**

It would be helpful if you could provide the name and address of any solicitor who acted for you:  
.....  
.....

**SECTION 5****Payment Details**

Unless otherwise indicated, existing payers will retain their current payment method and frequency. New taxpayers will be issued with an instalment card detailing monthly instalments, which can be paid by cash or cheque. However, if you wish to take advantage of the convenience of paying by Direct Debit please tick the box below and the necessary form will be sent to you.

Direct Debit payments required

**COUNCIL TAX CHANGE OF ADDRESS FORM PART 2**

Completion of Part 2 of this form is only necessary if you wish to claim a Council Tax discount or Reduction. An example of the Discount/Reductions available are listed below.

You can obtain an application form by placing a tick in the relevant box below, completing the Declaration and returning this form to the Council Tax Section.

Alternatively you can obtain further information and/or Application Forms from:

Revenues Reception, Ground Floor, Civic Centre, Carlisle – Telephone (01288) 817200.

**A. Council Tax Single Person Discount**

If you are the only person aged 18 or over living in the property you can claim 25% reduction on your Council Tax bill.

I hereby confirm that I am, and have been since \_\_\_\_\_ the only resident of my property.  
I wish to claim the 25% discount.

**B. Council Tax Status Discount**

You may be entitled to a discount to reduce your Council Tax bill if any of the adults resident in your household fall within one or more of the groups listed below and certain conditions are met.

If you require further information please tick the relevant box and the appropriate claim form will be sent.

*(PLEASE NOTE THAT A DISCOUNT WILL NOT APPLY WHERE THERE ARE TWO OR MORE ADULT RESIDENTS WHO DO NOT FALL INTO ANY OF THE GROUPS LISTED BELOW).*

Full time students including nurses studying under the Project 2000 Scheme or University.	<input type="checkbox"/>	Apprentices.	<input type="checkbox"/>
Student Nurses not studying under the Project 2000 Scheme or University.	<input type="checkbox"/>	Youth Traing Trainees.	<input type="checkbox"/>
School/College Leavers aged 18 or 19 who have just left School/College (only applies between 1 May and 31 October in any year).	<input type="checkbox"/>	People who have a severe mental impairment.	<input type="checkbox"/>
Person aged 18 or 19 in respect of whom child benefit is payable.	<input type="checkbox"/>	Persons in detention.	<input type="checkbox"/>
Patients who have their main residence in a Care Home, Nursing Home or Hospital.	<input type="checkbox"/>		
Care Workers in receipt of minimal pay or carers of disabled persons where the disabled person is neither a spouse nor child (under 18) of the carer.	<input type="checkbox"/>		

**C. Council Tax Disability Reductions**

If there is a disabled person residing in your property who requires space for a wheelchair to be used inside the home, or an additional kitchen or bathroom, or any other room used predominantly by them to meet their special needs, you may be entitled to a reduction in your Council Tax Bill.

If you require further information please tick this box and the appropriate claim form will be sent

**D. Council Tax Benefit**

If you are receiving Social Security Benefit(s) and/or you have a low income, you may be entitled to Council Tax Benefit which can reduce your Council Tax.

Please tick this box if you require an application form

**E. Declaration**

I have indicated my wish to apply for a Council Tax Discount/Reduction by placing a tick in the relevant box.

I understand that I will be required to complete an application form and may also be requested to provide evidence/documentation to verify my claim.

Signature..... Full Name .....

Address .....

Telephone Number .....

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.