# Revenues & Benefits Services

## **Council Tax**

Application for Discount – Care Worker



Please use black ink and block capital letters or typescript

### Background

The Council Tax due on a property may be discounted because of the personal circumstances of the adult residents. For the purpose of this reduction, adults who are providing care or support (or both) to another person are disregarded when counting the number of adults in the house, as long as one of the following requirements are fulfilled:-

- 1. Paid Care Workers is a person providing care or support on behalf of a relevant body (e.g. local authority, charity or the Crown) or employed to provide such care or support to that employer and to whom they were introduced by a relevant body, for at least 24hrs per week, paid no more than £44 per week, and resides in premises provided by or on behalf of the relevant body or employer for the better performance of their work;
- 2. Unpaid Care Workers a person providing care or support, for an average of at least 35hrs per week, to someone in receipt of certain disablement related state benefits\* and resident in the same house, excluding their spouse/partner or a child of theirs aged under 18.

In order to claim a discount, please complete the relevant parts of Section 1, ask the employer to complete Section 2 where applicable, sign the declaration on Page 2 and return the form to the address at the bottom of the page.

Applicant Details							
Name				cil Tax			
riamo			Refe	rence			
Property Address							
Section 1: To be completed by the applicant							
I apply for a reducti	eduction on the basis that (insert name)			is a care worker as defined above.			
The number of adults (including the above named) usually resident in the house is							
Paid Care Workers - please have Section 2 completed by your employer and ignore the rest of Section 1.							
Unpaid Care Workers - complete the rest of Section 1 below and ignore Section 2.							
Name of person ca	red for						
Relationship of the person cared for to the care worker							
If person cared for birth	is a child of the care worker please p	e of					
Average number of hours care provided per week							
The state benefit re	ceived by the person cared for is						
Please provide evidence of the state benefit, e.g. a letter of entitlement.							

<sup>\*</sup> highest rate of Attendance Allowance, or daily living component of personal independence payment enhanced rate

Section 2: To be completed by the employer						
The person named in Section 1 has been a care worker since (insert date)						
Average number of hours care provided per week						
Gross Weekly Wage						
I confirm their residence is provided for the better performance of their work.						
Employer's Stamp	Signature					
	Signature					
	Position					
	Date					

Declaration							
I confirm that the information on the form is true and correct. I undertake to inform Revenues & Benefits within 21 days of any change in circumstances. Failure to provide this information is an offence which may make me liable to an initial fine of £50 and £200 for each subsequent offence.  Signature of Liable Person							
Signature		Date					
Email Address		Daytime Telephone No.					

#### Data Protection Act and General Data Protection Regulations ("GDPR")

East Dunbartonshire Council holds, uses and processes information in accordance with the General Data Protection Regulations and all other relevant national data protection laws. Your information may be shared with other departments within East Dunbartonshire Council or other organisations for the purposes of administering and collecting council tax and applying relevant reductions, discounts and exemptions; checking the information we hold is accurate; preventing and/or detecting crime and protecting public funds. Other organisations may include bodies responsible for auditing or administering public funds or conducting data checks, other councils, public sector agencies, governmental departments, regulatory and law enforcement bodies and other private companies or entities (such as credit reference agencies, service providers/contractors and/or partner bodies).

For further information detailing how East Dunbartonshire holds and uses your information please refer to the privacy notice enclosed with this form. Details are also available on our website at: <a href="http://www.eastdunbarton.gov.uk/counciltax">http://www.eastdunbarton.gov.uk/counciltax</a>

#### Other Formats & Translations

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Corporate Communications Team at 12 Strathkelvin Place, Kirkintilloch, G66 1TJ, tel 0300 123 4510

本文件可按要求翻譯成中文,如有此需要,請電 0300 123 4510。

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ براہ مہر بانی فون نمبر 4510 123 0300 پر رابطہ کریں۔

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਫ਼ੋਨ ਕਰੋ।

Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhìth oirbh. Cuiribh fòin gu 0300 123 4510

अनुरोध करने पर यह दस्तावेज हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फोन कीजिए।