Return by Post or if calling in person to: Revenues & Payments, Kilncraigs, Greenside Street, Alloa, FK10 1EB **Telephone** 01259 450000

Fax: 01259 727455

	FOR OFFICE USE ONLY
	UPRN Ref
	CTX Ref
	Date of Issue
	Date of issue
'	
Council Tax Discou	nt: Claim Form
Persons with a Severe I	Viental impairment
Background	
A full Council Tax Bill assumes that there are two adults (aged	18 or over), living in a household. If there are less
then two adults living there, a discount may be due.	<i>y</i>
Persons with a severe mental impairment are not counted wit	h adults when working out a discount.
 A property occupied only by persons with a severe mental im	pairment is exempt from Council Tax - this means that
no tax is payable.	•
How to Claim Please fill in this form and return it to this office. The form sho	uld be filled in by the Council Tay payer or by their
representative. Section 5 should be completed by a doctor.	and be filled in by the council fax payer, or by their
Section 1: Names of all residents in the l	nousehold (aged 18 or over)
_	
Title	ırname
Soction 2: Varied datable warmen at the se	w Annainte a Dataila
Section 2: Your details - representative of	
(If you are filling in the form on behalf of the Counci	ı ıax Payer)
Your name	
Title <u>Forename</u> Su	rname
Address:	

August 2018 Continued overleaf

Post Code:

Relationship to the person named in Section 3

roperty Address	
	Post Code
	Fost Code
you would like the Council Tax correspondence to come	to you, tick here
Section 3: About the person with the seve	re mental impairment
Full Name: Title: Forename:	
Surname:	
his person is entitled to:	This person is entitled to:
tick ncapacity Benefit	tick Constant Attendance Allowance as
Formerly Invalidity Benefit)	part of a War Pension or an Industrial Injuries Benefit
Employment & Support Allowance	An Unemployment Supplement to
Attendance Allowance	Industrial Injuries Benefit
Constant Attendance Allowance	An Unemployability Allowance as
Severe Disability Allowance	part of Industrial Injuries Benefit or War Disablement Pension
Middle or higher care component of Disability Living Allowance	Income Support which includes a
Daily Living Component (PIP)*	Disability Premium on the grounds of incapacity for work
Disability Working Allowance	Universal Credit which includes
Date benefit awarded from: / / / /	limited capability for work and
	work related activity
If entitled to more than one benefit award, give the date Please enclose evidence of the benefit payment, such	
Personal Independence Payment	
Section 4: Declaration	
declare that all the information given on this form is a tr	ue and full statement.
have enclosed evidence to support my claim. shall notify the Council immediately of any changes in co	ircumstances
shall notify the Council infinediately of any changes in c	ircumstances.
Signed	Date / / / /
Daytime Telephone (in case of query)	

Section 5: For completion by a registered medical practitioner Background For Council Tax purposes a person is severely mentally impaired if he or she has a severe impairment of intelligence and social functioning (however caused) which appear to be permanent

intelligence and social functioning (however caused) which appear to be permanent.
Declaration In my opinion the person named in section 3 is severely mentally impaired and has been so from Date / / / / / / / / / / / / / / / / / / /
Doctor's name (block capitals)
Title Forename Surname
Surgery/Hospital Address Post Code
Status (G.P. etc)
Signature Date / / / /

Data Protection Statement

In line with Data Protection legislation and as the data controller Clackmannanshire Council will process your personal information for the purposes of collecting any Council Tax you owe us as per Local Government Finance legislation.

The Council has a duty to manage public funds properly.

As a result, we will use the information you provide to make sure all amounts we are owed are paid on time (for example by identifying people who have not yet paid their Council Tax and claim benefit they are not entitled to).

Revenue Service will also use personal data held for Council Tax Reduction purposes to assist in the processing of all claims made for Welfare Benefits and the Scottish Welfare Fund.

In addition to the stated purposes, we are also legally obliged to share certain data with other public bodies such as DWP and will do so where the law requires this; we will also generally comply with requests for specific information from other regulatory and law enforcement bodies where this is necessary and proportionate. We may also check your details with other organisations for the purposes of confirming who is living at a particular address.

We may also use your information to create management information, including statistical analysis to help combat fraudulent claims and improve customer service and satisfaction.

The council maintains a records retention and disposal schedule which sets out how long we hold different types of information for.

You have the following rights:

To be informed - this right requires us to provide you with certain information when we receive personal data from you.

To have access to your personal data

To ask us to rectify any inaccurate personal data about you

To exercise a limited right to ask that we erase personal data that we use about you

To ask us to restrict our use of your personal data until such time as a dispute about accuracy or the Council's use of your personal data can be established

To make an objection to us about our use of your personal information based upon your particular circumstances

If you wish to exercise any of your rights, you should contact the Council's Data Protection Officer on 01259 450000 or email: dpo@clacks.gov.uk

Complaints

If you are disatisfied about the way we have used or are using or intend to use, you personal data, including where you believe we have not complied with your rights under data protection laws. The commissioner will investigate any complaints and will inform you of progress and the outcome of your complaint.