

Council Tax - Care Leaver Discount

Council Tax Office, Wesley House, Corporation Street, St Helens, WA10 1HF
 Helpline: (01744) 675255 (Mon to Thu 8:45am-5:15pm Wed from 10am, Fri till 5pm)
 Return to St Helens Council, PO BOX 10592, Nottingham, NG6 6DP



St. Helens
Council

About you:

Name:	
Address	
Postcode	

Date of Birth	/ /	Council Tax Account Number	
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Please provide your contact details in case we need to contact you about your claim:

Home Telephone		Mobile	
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Email Address	
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Other discounts I may be entitled to:

Number of adults, including you, aged 18 years or over living in the property
I wish to apply (or have already applied) for a sole occupancy discount	Yes / No / N/A
I am a full-time student and wish to apply (or have already applied) for a student disregard	Yes / No
I am in receipt of an out-of-work benefit or have a low income and wish to apply (or have already applied) for Council Tax Reduction.	Yes / No

Name of Personal Advisor, St Helens Council, People's Services Department	
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I wish the discount to be applied from the following date	/ /
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Your information

Information collected on this form will be used for the assessment of Council Tax. It will be treated as confidential and will be held securely. It will be processed by St Helens Council and its authorised contractors in accordance with data protection legislation.

Council tax information on discounts is retained for financial and audit purposes from April 1993. Applications forms will be retained for six years.

The Council has a duty to protect public funds and to prevent and investigate allegations of fraud and error. The Council participates in fraud initiatives, including the National Fraud Initiative, and may verify the data we hold with other organisations, including other local authorities and credit reference agencies.

We will only disclosure information to other bodies where it is allowed by law. This may include: a representative (when you have given consent); debt collection and tracing agents; local and central government; ombudsman and regulatory authorities; courts and tribunals; and law enforcement and prosecuting authorities.

You have the right to access certain information we hold about and to request that inaccurate or incomplete information is corrected.

For further information regarding this how we use your data and your rights please visit www.sthelens.gov.uk/counciltax or contact the Data Protection Officer at dataprotection@sthelens.gov.uk.

Your declaration:

I wish to apply for a council tax Care Leaver's discount. I understand the following:

- My information will be cross-checked with social care records to confirm entitlement.
- Details of the discount, including the reason, will be shown on my council tax bill.
- I must notify St Helens Council, within 21 days if: I move address; or as a result of a change in my circumstances, I no longer qualify or will be entitled to less discount.
- I may be fined if I fail to promptly report a relevant change in my circumstance.
- I have the right to withdraw my consent to receive this discount at any time.

I declare that the information I have given on this from is correct and complete

Signature		Date	/	/
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Office use only – To be completed by People's Services Department

I confirm that the above person is a care leaver and is eligible to claim a discount.

LCS reference number of Care Leaver				
Name				
Signature		Date	/	/