

Apply for a Council Tax Reduction – Receiving or Providing Care

Please read the notes overleaf. This form should be completed in ink and block capitals and returned to the Council Tax Team, East Lothian Council, Haddington, EH41 3HA. Failure to complete and return this form could result in the award of a Council Tax discount being delayed or cancelled.

This form is also available online at www.eastlothian.gov.uk/counciltaxforms

Section 1 – About the liable person

To be completed by all applicants

Name of person receiving or providing personal care	<input type="text"/>		
Address they have left in order to receive/provide care	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Will anyone be living at the above address while they are away?	Yes/No		
If yes, please provide their name(s) and date of birth	<input type="text"/>	D.O.B	<input type="text"/>
	<input type="text"/>	D.O.B	<input type="text"/>
	<input type="text"/>	D.O.B	<input type="text"/>
	<input type="text"/>	D.O.B	<input type="text"/>
Date absent from the above address	From	<input type="text"/>	To <input type="text"/>
If applicable, name and address of agent/next of kin/family member (see important note overleaf)	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		

Section 2 – About the property

To be completed by all applicants

If the liable person does not own the property they have left, please provide the owner's name and address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Is the property furnished?	Yes/No		
Date absent from the above address	From	<input type="text"/>	To <input type="text"/>

Section 3 – About the care

To be completed by all applicants

Please tick the box(es) which best describe the reason(s) for care being provided or received

Illness

Past or present drug dependence

Old age

Past or present alcohol dependence

Disablement

Past or present mental health disorder

Other, please specify

If the liable person has left home to receive care in a hospital or residential home, a Doctor or Health Care Professional should complete Section 4

If the liable person has left home to receive care elsewhere, please go to Section 5

If the liable person has left home to provide care, please go to Section 6

Section 4 – Receiving care in a hospital or residential home

To be completed by a doctor or health care professional if care is being provided in a hospital or residential home

Name and address of hospital or home

Date patient was admitted

Is the patient's stay likely to be permanent?

Yes/No

If no, expected discharge date

Please complete and sign the Declaration at the end of the form.

Section 5 – Receiving care elsewhere

To be completed if the liable person is receiving care somewhere other than a hospital/ home, e.g. supported housing

Name and address of the property where the care is being received

Does the liable person intend to return to their sole and main residence?

Yes/No

If yes, expected date

If care is being received in someone else's home, you may be asked to provide evidence to show that the person being cared for is living there, e.g. confirmation from patients doctor of the date care started, how long it is likely to last, etc.

Please complete and sign the Declaration at the end of the form.

Section 6 – Providing care elsewhere

To be completed if you have left your home to provide personal care elsewhere

Name of the person you are providing care for

Address where you are providing personal care

Do you intend to return to your sole and main residence?

Yes/No

If yes, expected date

Please complete and sign the Declaration at the end of the form.

Declaration

To be completed by all applicants

I confirm that (enter liable person name)

Is receiving care in a hospital or residential home, as noted in Section 4

Is receiving care elsewhere, as noted in Section 5

Is providing care elsewhere, as noted in Section 6

Signature

Relationship to liable person/patient

Date

Stamp of hospital/home (if applicable)

Notes

A full Council Tax bill assumes there are two adults (aged 18 or over) living in a household. Some household members are disregarded for the purposes of Council Tax.

Usually one person, called the **liable person**, has to pay Council Tax. Couples living together will both be **jointly and severally liable** - this means they are responsible as a couple but also individually.

To work out if you are due a reduction in Council Tax, we look at the circumstances of all residents in a property. A resident is someone aged over 18 years who has his or her **sole or main residence** in the property.

Where a person is absent from the household, for example to be cared for or providing care elsewhere because of old age, disablement, illness, past or present alcohol or drug dependence or past or present mental disorder, then this person is associated with two properties. In these circumstances the Council must make a determination as to what is that person's sole or main residence.

Example 1 – Receiving care in a hospital or residential home

A single person lives in a privately owned home. They go into a care home/hospital and will not return home. The house will be exempt from the date of admission.

Example 2 – Receiving care elsewhere

A single person lives in a council house. They move in with relatives or to supported accommodation and intend to return to their council house. The unoccupied home is exempt.

Example 3 – Providing care elsewhere

A couple live in a privately owned home. On 1 October 2021, the lady moves in with her friend to care for her during recovery from an illness. Her husband remains in the family home, therefore would still be liable for Council Tax but would receive a 25% discount from that date, due to being the only occupant in the home.

Important note for agent, next of kin or family member

If you are an agent, next of kin or family member to the patient, a Council Tax Officer can only discuss the account of an adult without capacity if you have a Power of Attorney, Appointee or Mandate of Authority document that explicitly allows for intervention in these matters. A copy of this document should be sent to the Council Tax team along with this application.

If you do not have the appropriate document in place, then we will not be able to share personal data except in the presence of a court order or other legal obligation.

If you need to contact the Council Tax team, please visit www.eastlothian.gov.uk/counciltaxforms and complete one of our online forms or phone 01875 824314. For further information about Council Tax visit www.eastlothian.gov.uk/counciltax

For information about local Council offices and opening times, visit the Council website www.eastlothian.gov.uk or phone our switchboard on 01620 827827.

East Lothian Council uses the personal data you provide for purposes associated with the delivery of our services. For more information go to:
www.eastlothian.gov.uk/privacyp

Personal data will be retained in line with East Lothian Council's retention policies.
For more information contact Data Protection Officer, East Lothian Council, John Muir House,
Haddington, EH41 3HA. Email dpo@eastlothian.gov.uk