

Council Tax

Application for Disability Relief



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Finance and Office Services
Local Taxation and Benefits

In order to assess this application, Canterbury City Council will need to be satisfied that:

- (a) there is a disabled resident who needs either space for a wheelchair to be used inside the home, or an additional kitchen, bathroom or other room; and
- (b) this space, kitchen, bathroom or room is essential or of major importance to the well being of the disabled resident because of the nature and extent of his/her disability.

In deciding whether this condition applies, Canterbury City Council will consider whether, if the room or extra feature were not available:

- (i) the disabled person would find it physically impossible or extremely difficult to live in the dwelling;
- (ii) his/her health would suffer or the disability would be likely to become more severe.

It will help in the consideration of this application if the applicant can supply a note from a doctor, or other qualified professional such as an occupational therapist or social worker, confirming that the disabled resident needs the extra space or room as stated in section C. (In order to qualify the disabled person must be substantially and permanently disabled)

If for any reason you are unable to obtain such confirmation easily, then do not delay your application if you believe you are eligible for a reduction. However, we may subsequently need to ask for evidence in support of your application.

A Applicant (only people who are liable to pay the council tax can apply for a reduction, but the application can be in respect of any person who has their sole or main residence in the property)

Name

Address

.....

Postcode Daytime telephone number

B Disabled Person (the disabled person must be living in the dwelling for which the reduction is being sought)

Name (if different from above)

C Nature of Disability

D Grounds for application (please tick boxes)

Is there:

(i) a room which is predominantly used by and required for meeting the needs of the disabled person?

	<input type="checkbox"/>		<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

(ii) a **second** bathroom or kitchen required for meeting the needs of the disabled person?

	<input type="checkbox"/>		<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

(iii) a wheelchair used indoors by the disabled person?

Yes	No