

**Part 2 (continued)** Please tick if appropriate

d) providing care to someone **other than** his/her spouse or partner or his/her child under 18 years of age.

\*If you have ticked an allowance in **Part 2 section a)** please supply evidence of the allowance, for example a letter of entitlement.

**Declaration:**

- The details given on this form are true and accurate to the best of my knowledge.
- I undertake to inform the council immediately of any changes in the information I have provided.

**Signature of applicant**

\_\_\_\_\_

**Date**

\_\_\_\_\_

In the event of any queries the Council may have, it would be helpful if you could state your telephone number. (Please note this is not obligatory).

**Council Tax Reference (if known) :**

\_\_\_\_\_

Please send me a direct debit instruction.

If you have any questions regarding your application please telephone the Council and ask for the Revenues Section on **(01306) 879293**, or write to the Revenues Section at:-

**Mole Valley District Council**  
Pippbrook  
Dorking  
Surrey  
RH4 1SJ

or call into the Council Offices at **Pippbrook, Dorking, Surrey**, between the hours of 8.30 a.m. and 5.00 p.m.

# Council Tax Carers Disregard Discount



Mole Valley District Council  
Pippbrook  
Dorking  
Surrey  
RH4 1SJ  
  
Telephone: 01306 879293  
Facsimile: 01306 879395  
Email: council.tax@molevalley.gov.uk  
[www.molevalley.gov.uk](http://www.molevalley.gov.uk)

**For Council Tax purposes you may be considered as a Carer if you provide a substantial level of care to a person other than your partner or spouse, or your child if under the age of 18. If you think you may qualify please read and complete this leaflet.**

# Council Tax Carers Disregard Discount

The full council tax bill assumes that there are at least two adults living in a property. A person will not be counted for council tax purposes if he/she fulfils all the requirements set out in either Part 1 or Part 2 of this application. If after disregarding a carer there are still at least two other qualifying adults resident in the property, no discount will apply.

## How do I apply?

If you think you qualify for this discount please complete the following general details together with either Part 1 or Part 2 of this leaflet, as appropriate, sign the form and return it to Mole Valley District Council at the address quoted **together with the necessary proof.**

## What should you do if you cannot pay your council tax bill?

You should contact the Council's Revenue Section to discuss the situation as arrangements, including payment by direct debit, may be made to settle your account.

## Can I get help due to my income?

There is a scheme called Council Tax Benefit which aims to assist those people on State Benefit or low incomes to pay their council tax. If you think you fall into one of these two groups and would like more information and, or an application form, please tick the relevant box and an application form will be sent to you.

## Application for Carers Discount

**Applicant** (person liable for the council tax bill)  
Title: Mr/Mrs/Miss/Ms(Please delete as appropriate)

**Name :** .....  
(Please print name in full.)

**Address:** .....

.....

**Carer :**  
Title: Mr/Mrs/Miss/Ms(Please delete as appropriate)

**Name :** .....  
(Please print name in full.)

**[Enter second carer here if appropriate]**  
Title: Mr/Mrs/Miss/Ms(Please delete as appropriate)

**Name :** .....  
(Please print name in full.)

**Details of Person Cared for :**  
Title: Mr/Mrs/Miss/Ms(Please delete as appropriate)

**Name :** .....  
(Please print name in full.)

**Date engaged in providing care/support:**

.....

**Total number of residents in the property named above:**

.....

## Part 1 Please tick if appropriate

*Is the carer :*

**a) either i) providing care on behalf of a public body or charity (if yes please state name and address of public body or charity)**

*or* **ii) employed by the person to whom he/she was introduced by a public body or charity)**

**b) engaged or employed to provide care for at least 24 hours a week.**

**c) receiving payment of not more than £36 a week under this employment (please supply a letter from the employer as evidence).**

**d) resident in premises provided by the public body or charity, or by his/her employer for the better performance of his/her work.**

## Part 2 Please tick if appropriate

*is the carer :*

**a) providing care to a person who is receiving one of the following\* :**

i) the higher rate of attendance allowance.

ii) the highest rate of the care component of disability living allowance.

iii) the highest rate of disablement pension.

iv) an increase in constant attendance allowance.

**b) resident in the same dwelling as the person to whom he/she is providing care.**

**c) providing care for at least 35 hours a week on average (if claiming a carers discount for more than one person, each person must be providing care for at least 35 hours per week).**