



For office use Only

PRN:

DATE SENT:

APPLICATION FOR COUNCIL TAX DISCOUNT - MEMBERS OF RELIGIOUS COMMUNITIES

Thank you for your enquiry regarding a reduction in your Council Tax. Please fill in this form and return it immediately to: **Birmingham City Council, Resources, (Revenues and Benefits), P.O Box 5, Birmingham B4 7AB.**

To qualify for this discount an individual must be living in a religious community whose main occupation is prayer, contemplation, education, or the relief of suffering, and is dependant on the community to provide their material needs.

Section A

How many people live in your home who are aged 18 or over?
Remember to include yourself.

Section B

Please fill in the following information.

(i) Name of the religious community. _____

(ii) Address of community. _____

(iii) Main occupation of members of the community. (it will help us to deal with your discount if you provide a copy of the aims and objectives, or constitution of the religious community).

- (iv) Please list all members of the community, together with the date they took up residence and the source of all their income and/or capital. Please write “community” if the religious community is the only source of income.

Full name of residents	Date they took up residence	Source of income (excluding personal money gifts)	Source of capital

Section C

Birmingham City Council has a duty to maintain accurate records for billing and collection of Council Tax. In order to meet this requirement the City periodically reviews all records including those where allowances discounts and relief's are granted. These records may be checked by using information already held by the City and its partner organisations such as credit referencing agencies to identify cases where such allowances, discounts and reliefs no longer apply.

Declaration

I declare the information that I have given is correct and complete to the best of my knowledge. I understand the council may make enquiries to verify the information I have given.

I will notify you immediately if my circumstances change which will affect the amount of Council Tax I am charged.

Please sign the form and give your daytime telephone number, as it may help us to deal with your application quickly.

Signed _____

Date _____

Print Name _____

Telephone Number _____

Email address _____