

COUNCIL TAX SUPPORT CHALLENGE FORM

Name:	FOR OFFICE USE ONLY:
	PIN/CRN:
Address:	
	DATE OF ISSUE:
Post code:	DATE RECEIVED:
National Insurance number:	
Daytime telephone number:	
Home:	
Work:	
Mobile:	
Email:	
(Please note, we will respond to you via email unless	
otherwise specified)	

When to use this form

You can use this form to challenge us against the amount of council tax you have to pay for either of the reasons below

- You think that, under the rules of the Council Tax Support Scheme, you should have been given a reduction on the council tax you have to pay
- You think the amount of reduction you have been given under the Council Tax Support Scheme is not correct

You cannot challenge us about the rules that we have put in our scheme, only about how the rules have been applied to your case

You may not agree with the Council Tax Support Scheme that Birmingham City Council has set up but please be aware that you can only challenge a decision regarding Council Tax Support and not against the scheme itself

CTSC FORM 110313 1

Use this page to tell us which Benefit Service decision you are challenging and why you do not agree with the decision. It is not enough to say "I do not agree with the decision" or "the reduction is not enough"; you must say why you think the decision is wrong

Date of decision you are challenging:	
The reasons why I think the decision is wrong are:	
Declaration	
Even if someone else has filled in this form for you, you must sign this declaration.	
Please read this declaration carefully before you sign and date it.	
I declare that the information I have given on this form is correct and complete	
I understand that if I give information that is incorrect and incomplete, you may take action against me	
Signed: Date:	
PLEASE RETURN THIS FORM TO:	
Benefit Service	
PO Box 8267 Birmingham	

CTSC FORM 110313 2

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