Discount application form for persons in detention

Please note:-

| Council Tax. Payment must be made in accordance with the bill already issued until you |
|---|
| have received confirmation that the request has been granted, |
| |
| Full name of person in detention: |
| |
| Address of property: |
| |
| |
| |
| Account reference number: |
| Account reference number: |
| Date of birth: |
| Date of birdi. |
| Name & address of place of detention: |
| |
| |
| |
| |
| |
| Prison number: |
| |
| Date taken into detention: |
| |
| Anticipated date of release or deportation: |
| la anciona alaa liidina at thain hanna addusaa? Vaa |
| Is anyone else living at their home address? Yes no If yes, how many adults, aged 18 or over live there? Please supply their names: |
| if yes, now many addits, aged to or over live there: Flease supply their hames. |
| |
| |
| |
| Signed: |
| |
| |

Making an application for a discount or exemption is not grounds for non payment of



| Dated: | |
|---------------------------|----------------|
| CONTACT TELEPHONE NUMBER: | EMAIL ADDRESS: |
| | |

Declaration

Please read carefully before you sign.

I/we understand the information contained on this form is correct and complete and I/we agree to notify the Council Tax section immediately should there be a change in circumstances that may affect the discount.

I/we understand that anyone who provides false information or fails to notify a change of circumstances for the purpose of obtaining / retaining a Council Tax reduction discount is committing an offence and may be liable to prosecution.

The Royal Borough of Greenwich has a duty to protect the public funds it administers and may use the information you have provided on this form within this authority for the prevention and detection of fraud. We may also share this information with other bodies administering public funds which may include other councils and government departments.

I/We have read, understood and agree to comply with the declaration above

Your signature Date

Daytime telephone number Email address

Please return this application form, with any supporting documents that may have been requested to;

Royal Borough of Greenwich Revenues & Benefits Service



Director of Finance The Woolwich Centre 35 Wellington Street London SE!8 6HQ

