

Guildhall Marshall's Yard Gainsborough DN21 2NA

Telephone: (01427) 676676 Fax: (01427) 675173

Web: www.west-lindsey.gov.uk

APPLICATION FOR COUNCIL TAX REDUCTION UNDER SECTION 13A OF THE LOCAL GOVERNMENT FINANCE ACT 1992

Please note that if a joint bill has been issued then the application must also be made in joint names.

Council Tax Account Reference Number:	
Name of Applicant(s)	Telephone Number
	Email Address
Contact Address	Address of property for which relief is being claimed
Owners Name(s)	Is the property currently vacant? Yes No
What is the value of equity in the property?	£
Is the property currently marketed for sale? Yes No	Please provide details of marketing agent/estate agent for this property
Is the property currently marketed for rent?	

Yes No Please provide details of marketing agent/estate agent for this property		
Please provide details of any other properties or land owned by yourself and value of any rental income	е	
you are in receipt of		
If you have left a property among the many at a many quitable accommodation as to receive as provide agree		
If you have left a property empty to move to more suitable accommodation or to receive or provide care due to old age, disablement, illness, alcohol or drug misuse or mental disorder then please provide details below	Э	
Please provide the detailed reasons why you are applying for a reduction in Council Tax. This should fully explain the circumstances that are creating financial difficulty and how long you expect these circumstances to continue		
Has an application for Council Tax Reduction been made?		
Yes No		
Are you receiving financial assistance from any other source?		
Yes No Please provide details		
Have you approached any organisation to assist with your current financial situation such as Citizen Advice Bureau / Money Advice etc.?		
Yes No		
Please provide details		
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Please provide details of any stocks/shares/savings/ money you may have or money you are owe
Please provide any additional information you may wish to provide in support of your application
Your application will not be processed unless the enclosed financial information sheet is completed and returned.
All applicants must provide documentary evidence in support of their claim. At a minimum these should include the following:
 Confirmation of all income received Bank statements Any additional information to support the application Written details of any savings/stocks/shares
declare that the information I have given on this form is complete and accurate, to the best of my knowledge.
I understand that a copy of this form may also be sent to Lincs2Advice who may be able to offer me further advice and assistance.
also understand that whilst this application for relief is pending I am not entitled to withhold payment of the council tax due to the council.
Signature: Date:
Full Name (please print):

West Lindsey District Council Privacy Notice

To find out more about why we need your information, what we will do with it and how to contact us if you have any concerns or questions please read our 'privacy notice' https://www.west-lindsey.gov.uk/privacy/

For Revenues specific concerns or questions please read our Revenues Privacy Notice https://www.west-lindsey.gov.uk/privacy/revenues-privacy-notice/

If you require a written copy of either of these statements please contact the Customer Service team on 01427 676676

Please return your completed form to West Lindsey District Council, Guildhall, Marshall's Yard, Gainsborough, Lincs. DN21 2NA