



Guildhall  
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## **HOSTEL OR NIGHT SHELTER**

The full Council Tax is made up of a property element (50%) and a person element (50%). The full charge assumes that there are two (or more) adult occupiers and if there is only one adult occupier a discount of 25% may be claimed.

Certain people are 'disregarded' for Council Tax purposes – that is they are treated as if they are not resident, which can result in a discount.

A person normally resident in the property but whose sole or main residence is in a HOSTEL or NIGHT SHELTER will be disregarded if:

- ◆ the dwelling is providing residential accommodation whether as a hostel or night shelter or otherwise;

### **AND**

- ◆ the accommodation provided is:
  - in units that are not separate or self contained
  - for people with no fixed abode or settled way of life,

### **AND**

- under licences to occupy the property which are not tenancies.

**IN ORDER THAT A DISCOUNT CAN BE CONSIDERED, PLEASE PROVIDE THE INFORMATION OVERLEAF AND RETURN TO THE ABOVE ADDRESS**

**Data Protection** – We are asking for this information in accordance with the provisions of the Council Tax (Administration & Enforcement) Regulations 1992 (Reg. 3) and the Data Protection Act 1998, S.29. It will be used to help us determine your liability for and collect your Council Tax. It may be shared with other sections of this Council, with other Councils and with other public bodies to determine eligibility for Housing Benefit, liability for Council Tax, to collect Council Tax, to assess and collect other Taxes and Duties, to help detect and prevent fraud, to help detect and prevent crime and to carry out public duties.

**PLEASE COMPLETE THIS FORM IN BLACK INK**

**Number of residents aged 18 or over now living in the property including yourself**   
(please also give the name(s) and date(s) of birth of anyone who is aged 16 or 17)

Name \_\_\_\_\_

Date or birth \_\_\_\_\_

Name \_\_\_\_\_

Date of birth \_\_\_\_\_

Name \_\_\_\_\_

Date of birth \_\_\_\_\_

Name of the person in Hostel / Night Shelter:

Address of Hostel / Night Shelter:

Contact tel No

Admission Date

Previous address

**DECLARATION AND SIGNATURE**

**WARNING: Deliberately giving false information could lead to prosecution**

I declare that the information I have given on this form is complete and accurate to the best of my knowledge and I understand that West Lindsey District Council may check the information given.

Signature

Date

Full name in capitals