COUNCIL TAX STRUCTURAL REPAIR EXEMPTION APPLICATION



PROPERTY REFERENCE NUMBER	ACCOUNT NUMBER
	If you require any help in completing this form, please telephone Customer Advice & Support on
	0300 100 1800
	or visit any Council Contact Centre/Library Contact Centre (locations can be found at www.scotborders.gov.uk/contactcentres) where our staff will be pleased to give you confidential assistance.
INTRODUCTION	
	n based on the property undergoing structural repair or major repair work t/reconstruction to make it habitable can be awarded for a maximum of upied.
Examples of work considered to be structural repa	air are:
 major roof repairs, leaving the property open removing/replacing internal and external surplines. removal of floor joists or staircases repair/renewal of foundations where majority of the internal walls have be removal of floorboards in the majority, or all where a property is totally gutted and is in experiments. 	een removed l of the property
	uctural include: replacing a kitchen or bathroom, installation of heating mbing, replacing windows/doors, general redecorating, removal of internal roof repairs.
Please complete this form USING BLOCK CAPITAL	LS and return it without delay to the address shown overleaf.
THE PROPERTY	
What is the address of the property for which ex	emption is claimed?
Who owns the Property?	
From when?	
Who is the Tenant (if any)?	
From when?	

ESTABLISHING EI	NTITLEMENT TO EXEMPTION DURING	PERIOD OF	CLAIM		
Does anybody live in	the property?	Yes	No		
Is the property furnis	hed?	Yes	No		
On what date was the	property last occupied?				
On what date was the	property last furnished?				
Is/was the property in repairs, improvement	ncapable of occupation due to structural ts or reconstruction?	Yes	No		
If Yes: On what date d	id work commence?				
On what date is comp	letion expected?				
	ure of the structural work and describe in det for any type of occupation.	ail the work be	ng undertaken which deemed that		
DECLARATION					
undertake such enqui the Council of any cha occupied or furnished public funds. Accordin	est of my knowledge the information given is tru- ries it considers appropriate (including inspection ange of circumstances (including immediate noti which may affect the liability for Council Tax. The gly, information I provide to the Council, and hele or and fraud, and may also be shared for the salunds.	on of property) to fication of the da ne Council is und d in the Council'	verify this claim. I undertake to advise ate on which the property becomes der an obligation to properly manage s computer systems, will be used to		
I claim exemption fro	m the Council Tax.				
YOUR SIGNATURE		DATE			
NAME		TEL NO			
ADDRESS FOR CORRESPONDENCE					
Capacity (e.g. Owner; Tenant; Sub-Tenant; Agent)					
To find out how we will process and use your personal information in connection with this request please see our Privacy Notices at www.scotborders.gov.uk/CASSPrivacyNotices If you would like a printed copy you can contact us via telephone on 0300 100 1800. When completed, this form should be returned to Scottish Borders Council Customer Advice & Support Service Council Headquarters Newtown St. Boswells Melrose TD6 0SA					
For Office Use Act By Date					