

Claim form for Council Tax Reduction



☎ 0300 100 1800

www.scotborders.gov.uk

customeradvice@scotborders.gov.uk

Your name and the address you want to claim for:

For office use only

Issue date / /

Contact date / /

Claim number

Your mobile phone number

Your daytime phone number

Your email address



- Please answer all the questions that apply to you. You must answer every question where there are 'Yes' and 'No' tick boxes.
- Do not delay in returning your claim form. Any entitlement will usually apply from the Monday after the day we receive your claim.
- We need to see original documents as proof. Details of the evidence we need are given at the end of each part of this form. If you do not currently have the evidence we need, you should still apply and provide the evidence we need within one month.
- If you rent your home and do not receive Universal Credit Housing Element, you should fill in the 'Claim form for help with your rent and Council Tax'.
- If you are a full-time student, you should not be legally responsible for paying Council Tax. Any applications for Council Tax Reduction **must** be made by the person legally responsible for paying Council Tax. If you are a single person, you should apply for an exemption from Council Tax. Please contact Customer Advice and Support to ask for this.

Do you have a partner who normally lives with you?

No

Yes

A partner means a person you are married to or have a civil partnership with, or a person you live with as if you were their husband, wife or civil partner. (A civil partnership is a formal arrangement that gives same-sex partners the same legal rights as a married couple.) If you answered 'Yes', you must answer each of the following questions for you and your partner.

When did you buy or start renting your home?

You

Your partner

When did you move in?

Feb 2019

Part 1: About you and your claim

You

Your partner

Title (Mr, Mrs, Ms, Miss and so on)

Surname

First name

Any other names you have been known by

Date of birth

National Insurance number

We must see evidence of this.

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

Have you come to live in England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Islands or the Isle of Man in the last two years?
If 'Yes', we will write to you about this.

No Yes

No Yes

What is your nationality?

If you are not British, when did you last enter and apply to stay in the UK?

What was your previous address?

Tell us whether you were a homeowner, a tenant or a lodger at that address.

If you were a homeowner or a tenant, please tell us when your ownership or tenancy ended.

When did you move out of that address?

Have you claimed Housing Benefit, Local Housing Allowance, Council Tax Benefit or Council Tax Reduction in the past?

No Yes

No Yes

When did you last claim?

Which council did you claim from?

What name did you use on the claim?

What address did you claim for?

If you claimed from another council, have you told them you have moved from this address?

No Yes

No Yes

Part 1: About you and your claim (continued)

You

Your partner

Are you in hospital at the moment?

No Yes

No Yes

If 'Yes', when did you go in?

/

/

When will you come out (if you know this)?

/

/

Are you away from home at the moment for any other reason?

No Yes
Go to part 2.

No Yes
Go to part 2.

If 'Yes', why are you not living at home?

When did you last live at home?

/

/

What is the address of where you are living at the moment?

Ethnic background

Under the Race Relations Act we have to gather details of our clients' backgrounds. We use this information to help us with our equal opportunities policies. This information is confidential and we will only use it to improve access to our services and help provide equal opportunities for everyone. You do not have to fill in this part of the form.

Which background do you feel you belong to?

Arab Any Arab background	<input type="checkbox"/>	Chinese Any Chinese background	<input type="checkbox"/>	White Any white background	<input type="checkbox"/>
Gypsy or Traveller Gypsy or Traveller	<input type="checkbox"/>	Other Explain	<input type="text"/>		
Asian Bangladeshi	<input type="checkbox"/>	Mixed Asian and white	<input type="checkbox"/>	Black African	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Black African and white	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Black Caribbean and white	<input type="checkbox"/>	Other	<input type="checkbox"/>
Other	<input type="checkbox"/>	Other	<input type="checkbox"/>		

Part 1: About you and your claim (continued)

Evidence

Please do not send valuable documents through the post. If you can, bring them to your nearest council contact centre. We will take copies to keep on file and give you the original documents straight back. If you cannot get to one of our offices, phone us for more advice. If you cannot provide the evidence we need at the moment, send the filled-in form back to us now and give us the evidence as soon as you can. **We can start to process your claim but we will not be able to pay any Council Tax Reduction until we have received all the evidence.**

To support part 1 of your claim, you must provide the following original documents.

- Evidence of identity**

Such as a birth certificate, marriage certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit or EEA identity card. We may need to see several of these documents for each person.

- Evidence of your address**

Such as a recent gas or electricity bill or a TV licence.

- Evidence of National Insurance number**

Such as a National Insurance number card, payslips, letters from the Department for Work and Pensions or HM Revenue & Customs.

For office use only

	Document(s) provided	Document(s) requested	Initials	NA
Identity				
Address				
NINO				

Part 2: About you and your partner

	You	Your partner
Do you get Disability Living Allowance or Personal Independence Payment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you have a vehicle from a mobility scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you get Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does anyone get Carer's Allowance for looking after you?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Part 2: About you and your partner(continued)

	You	Your partner
Have you ever been told that you are entitled to Carer's Allowance even if you do not receive it because you are getting another benefit instead?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Have you or your partner recently applied for Employment and Support Allowance but not received it because your income is too high or you have not paid enough National Insurance contributions?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Do you have a severe mental illness or form of dementia?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Evidence

To support part 2 of your claim, you must provide the following.

- **Evidence of being registered blind**
Registration document or certificate.
- **Evidence of a severe mental illness or form of dementia**
Letter from your doctor confirming your condition and the date it was diagnosed.

We must see **original documents**, not copies, and we need the same evidence for your partner, if you have one.

For office use only

	Document(s) provided	Document(s) requested	Initials	NA
Reg blind				
SMI				

Part 3: Students

	You	Your partner
Are you a student?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If 'Yes', tell us if this is full-time or part-time	Full-time <input type="checkbox"/>	Full-time <input type="checkbox"/>
	Part-time <input type="checkbox"/>	Part-time <input type="checkbox"/>
What are the dates of your or their academic year?	From <input type="text" value="/ /"/>	From <input type="text" value="/ /"/>
	To <input type="text" value="/ /"/>	To <input type="text" value="/ /"/>

Part 3: Students (continued)

You

Your partner

Name of the course

How long is the course?

 years

 years

Do you or they get a grant or bursary?

No

No

Yes

Yes

If 'Yes', how much do you or they get?

 £

 £

How much income is taken into account when working out the grant?

Do you or they get a student loan or top-up loan?

No

No

Yes

Yes

If 'Yes', how much do they get?

 £

 £

Evidence

To support part 3 of your claim, you must provide the following.

- Evidence of student status**

A student certificate from their college or university. (If they do not have a certificate, please tell us and we will send you a form for their college or university to fill in.)

- Evidence of student grant, bursary or loan**

A full award letter showing how the grant, bursary or loan was worked out.

For office use only

	Document(s) provided	Document(s) requested	Initials	NA
Cert				
Award				

Part 4: Children

We need to know about any children in your household who are:

- under 16;
- aged 16, 17, 18 or 19 and on a Skillseeker course, a 'Get Ready for Work' course or a Modern Apprenticeship, and who Child Benefit is still paid for; or
- aged 16, 17, 18 or 19 and in education doing a course not higher than GCE, SCE higher level or GNVQ (advanced) and who Child Benefit is still paid for.

Are there any children as described above in your household?

No Go to **part 5**.

Yes

Part 4: Children (continued)

1st child

2nd child

Surname

First name

Date of birth

Sex

The child's relationship to you

The child's relationship to your partner

Who gets Child Benefit for them?

3rd child

4th child

Surname

First name

Date of birth

Sex

The child's relationship to you

The child's relationship to your partner

Who gets Child Benefit for them?

5th child

6th child

Surname

First name

Date of birth

Sex

The child's relationship to you

The child's relationship to your partner

Who gets Child Benefit for them?

Part 4: Children (continued)

If there are more than six children, please use part 14 on page 21 to give us all the information we ask for in this part.

Are any of the children registered blind?

No

Yes

If 'Yes', please give their names.

Do any of the children get Disability Living Allowance?

No

Yes

If 'Yes', please give their names.

Do you or your partner pay childcare costs to a registered childminder, nursery or after-school club?

No

Yes

If 'Yes', please ask for a childcare costs form which your childcare provider must fill in and sign.

Evidence

To support part 4 of your claim, you must provide the following.

- Evidence of Child Benefit**
 Such as your most recent award letter or bank statement showing payment received.
- Evidence of being registered blind**
 Registration document or certificate.
- Evidence of childcare costs**
 Childcare costs form filled in and signed by your childcare provider.

We must see **original documents** (not copies), and we need the same evidence for your partner, if you have one.

For office use only

	Document(s) provided	Document(s) requested	Initials	NA
CB				
Reg blind				
CCC				

Part 4: Children – help with school meals, clothing and footwear

If you have children of school age, you may be entitled to free school meals and a grant for school clothing and footwear, depending on the type of benefit or tax credit you receive.

Please fill in the boxes below with details of the children you would like to claim for and tick what you would like to claim for each child.

The clothing grant is only paid once a school year for each child between August and the following March.

Child's name	School they go to	Free school meals	School clothing and footwear grant
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Type of benefit you or your partner receive (tick as appropriate)

Income Support	<input type="checkbox"/>	Child Tax Credit only with an income of less than £16,105 a year	<input type="checkbox"/>
Income-based Jobseeker's Allowance	<input type="checkbox"/>	Working Tax Credit and Child Tax Credit with an income of less than £6,420 a year	<input type="checkbox"/>
Income-related Employment and Support Allowance	<input type="checkbox"/>	Universal Credit with earnings less than £610 a month	<input type="checkbox"/>
Support under Part VI of the Immigration and Asylum Act 1999	<input type="checkbox"/>	Child Tax Credit and Working Tax Credit with an income of less than £16,105 (clothing grant only)	<input type="checkbox"/>

Your annual income amount will be shown on your tax credit award letter. Please make sure you send all pages of your award notice when applying for either free school meals or a clothing grant.

Bank account details for paying the school clothing and footwear grant

Name of account holder	<input type="text"/>
Bank name	<input type="text"/>
Bank address	<input type="text"/>
Sort code	<input type="text"/>
Account number	<input type="text"/>

Part 5: About other people who live with you

Do any adults usually live with you and your partner?

By adults we mean people over 16 who nobody gets Child Benefit for.

No

Go to **Part 6**.

Yes

Fill in this section.

If there are more than two people, use part 14 on page 21 to give us all the information we ask for in this part.

1st person

2nd person

Title (Mr, Mrs, Ms, Miss and so on)

Surname

First names

Date of birth

National Insurance number

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

Their relationship to you and your partner

Some examples are aunt, brother, grandson, lodger, joint tenant, joint owner or friend.

Do they pay rent or money for board and lodgings to you or your partner?

No Yes

No Yes

If 'Yes', how much?

£ a week

£ a week

Do they get Income Support, income-based Jobseeker's Allowance or income-related Employment and Support Allowance?

No Yes

No Yes

Do they get Universal Credit?

No Yes

No Yes

Do they get Pension Credit?

No Yes

No Yes

Do they get Disability Living Allowance, Personal Independence Payment or Attendance Allowance?

No Yes

No Yes

Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?

No Yes

No Yes

We must see evidence of this.

If 'Yes', please tell us which.

Do they have a severe mental illness or form of dementia?

No Yes

No Yes

Are they registered blind?

No Yes

No Yes

Part 5: About other people who live with you (continued)

1st person

2nd person

Are they in legal custody?

No Yes

No Yes

If 'Yes', from what date?

/ /

/ /

When do you expect them to come out?

/ /

/ /

Are they in hospital at the moment?

No Yes

No Yes

If 'Yes', when did they go in?

/ /

/ /

When are they due to come out (if you know)?

/ /

/ /

Do they normally work?

No Yes

No Yes

How many hours do they normally work each week?

hours

hours

How often are they paid?

Do they have any other income at all?

No Yes

No Yes

This includes any **benefits** or **allowances** you have not told us about on this form and **interest from savings and investments**.

If 'Yes', please tell us about it in the table below.

Who receives this income?	Where does it come from?	How much?	How often?
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are any of the people who normally live with you married to each other or living together as if they were married?

No Yes

We call these people partners.

If 'Yes', tell us their names.

If there are more than two partners, please use part 14 on page 21 to give us all the information we ask for in this part.

Part 5: About other people who live with you (continued)

Evidence

To support part 5 of your claim, you must provide the following.

- Evidence of their National Insurance number**
 Such as a National Insurance number card, payslips or letters from the Department for Work and Pensions or HM Revenue & Customs.
- Evidence of their Universal Credit**
 Such as a screen print from your online journal. You can get this by logging in to www.gov.uk/sign-in-universal-credit.
- Evidence of them being registered blind**
 Registration document or certificate.
- Evidence of their severe mental illness or form of dementia**
 Letter from their doctor confirming their condition and the date they were diagnosed.
- Evidence of their student status, them being an apprentice or care worker, or them being on youth training**
 Student – student certificate from their college or university. (We can send you a form for their college or university to fill in.)
 Apprentice or youth training – letter from their employer, college or training provider.
 Care worker – letter from their employer or the care organisation.
- Evidence of their earnings**
 We need to see their last five payslips if they are paid every week, their last three payslips if they are paid every two weeks, or their last two payslips if they are paid every month or every four weeks. If they are self-employed, we need to see accounts for the last financial year or, if they have been trading for less than six months, a summary of their trading records so far.
- Evidence of any other income they have**
 Such as pension slips, their most recent award letter or bank statement showing payments received.

We must see **original documents**, not copies.

For office use only

	Document(s) provided	Document(s) requested	Initials	NA
NINO				
Universal Credit				
Reg blind				
SMI				
Student etc				
EI				
Other				

Part 6: About your Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance, Universal Credit and Pension Credit

	You	Your partner
If you or your partner are not currently working, please confirm the date you last worked.	/ /	/ /
Are you or your partner getting or waiting to hear about a claim for contribution-based Jobseeker's Allowance? If you answered 'Yes', please go to part 7.	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner getting Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance, Universal Credit or Pension Credit at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If you answered 'Yes', when did you start getting it? Read the evidence section below, then go to part 14 on page 21.	/ /	/ /
Are you or your partner still waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance, Universal Credit or Pension Credit?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes' when did you claim?	/ /	/ /

Evidence

To support part 6 of your claim, you must provide the following.

- Evidence of Universal Credit**
Such as a screen print from your online journal. You can get this by logging in to www.gov.uk/sign-in-universal-credit.

We must see **original documents** (not copies), and we need the same evidence for your partner, if you have one.

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
Universal Credit				

Part 7: About being self-employed

	You	Your partner
Are you or your partner self-employed?	No <input type="checkbox"/> Go to part 8 . Yes <input type="checkbox"/> Please ask for a self-employed form to fill in.	No <input type="checkbox"/> Go to part 8 . Yes <input type="checkbox"/> Please ask for a self-employed form to fill in.

Part 7: About being self-employed (continued)

Evidence

To support part 7 of your claim, you must provide the following.

- Evidence of self-employed income**

A filled-in self-employed form along with your accounts for the last financial year or, if you have been trading for less than six months, a summary of your trading records so far.

We must see **original documents** (not copies), and we need the same evidence for your partner, if you have one

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
Form				
Accounts				

Part 8: About working for an employer

You

Your partner

Do you work for an employer?

No Yes

No Yes

If 'No', go to **part 9**.

If 'Yes', answer all the questions in this part.

If you work for more than one employer, use part 14 on page 21 to give us all the information we ask for in this part.

What kind of work do you do?

What is your employer's name and address?

When did you start this job?

 / /
 / /

What is your payroll, employee or staff number?

Are you employed for a limited period?

No Yes

No Yes

How often do you get paid?

 every

 every

How are you paid?

For example, in cash, by cheque or straight into a bank account.

How many hours a week do you usually work?

 hours

 hours

What is your hourly rate or annual salary?

 £ every

 £ every

Part 8: About working for an employer (continued)

	You	Your partner
Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay, Statutory Maternity Pay (SMP) or any other sick pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you receive any bonus, overtime, commission or tips?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes', please say what you get, how often you get it and the total amount.	<input type="text"/>	<input type="text"/>

Evidence

To support part 8 of your claim, you must provide the following.

- Evidence of other work**

We need to see your last five payslips if you are paid every week, your last three payslips if you are paid every two weeks, or your last two payslips if you are paid every month or every four weeks. If you do not have payslips, please ask us for an employer's certificate.

We must see **original documents** (not copies), and we need the same evidence for your partner, if you have one.

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
EI				

Part 9: About any other work

	You	Your partner
Do you do any other work at all? This could be voluntary work or any other work, even if it is not paid work.	No <input type="checkbox"/> Yes <input type="checkbox"/> Go to part 10 .	No <input type="checkbox"/> Yes <input type="checkbox"/> Go to part 10 .
What other work do you do?	<input type="text"/>	<input type="text"/>
What is the name and address of the person you do this work for?	<input type="text"/>	<input type="text"/>
When did you start this work?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
How many hours a week do you usually work?	<input type="text"/> hours	<input type="text"/> hours
Do you get paid? If you only get expenses or tips, still tick 'Yes' and give details.	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you get before any deductions?	£ <input type="text"/>	£ <input type="text"/>
How often are you paid?	every <input type="text"/>	every <input type="text"/>

Part 9: About any other work (continued)

Evidence

To support part 9 of your claim, you must provide the following.

- Evidence of other work**

We need to see your last five payslips if you are paid every week, your last three payslips if you are paid every two weeks, or your last two payslips if you are paid every month or every four weeks. If you do not have payslips, please ask us for an employer's certificate.

We must see **original documents** (not copies), and we need the same evidence for your partner, if you have one.

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
EI				

Part 10: About benefits and pensions

Are you or your partner getting any of the benefits listed below or waiting to hear about any benefits you have claimed?

No Go to **part 11**.

Yes Tell us about the full amount before any deductions below.

Adoption Pay Industrial
 Armed Forces and Reserve Forces Compensation Payments
 Bereavement Allowance
 Bereavement Support Payment
 Child Benefit
 Carer's Allowance
 Child Tax Credit
 Employment and Support Allowance (contribution based)
 Fostering Allowance
 Guardian's Allowance
 Incapacity Benefit
 Industrial Injuries Disablement Benefit

Death Benefit
 Jobseeker's Allowance (contribution based)
 Severe Disablement Allowance
 State Pension
 Statutory Maternity Pay
 Statutory Paternity Pay
 Statutory Sick Pay
 War Pension or War Widow's Pension
 Widow's or Widower's Benefit
 Working Tax Credit
 Universal Credit

If you are getting or have claimed any benefit that is not listed, tell us about it in part 14.

	You	Your partner
The name of the benefit or pension	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Are you (please tick one box):		
- waiting to hear?	<input type="checkbox"/>	<input type="checkbox"/>
- getting it now?	<input type="checkbox"/>	<input type="checkbox"/>
How much and how often?	£ <input style="width: 80%;" type="text"/> every	£ <input style="width: 80%;" type="text"/> every
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
The name of the benefit or pension	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Are you: (please tick one box):		
- waiting to hear?	<input type="checkbox"/>	<input type="checkbox"/>
- getting it now?	<input type="checkbox"/>	<input type="checkbox"/>
How much and how often?	£ <input style="width: 80%;" type="text"/> every	£ <input style="width: 80%;" type="text"/> every

Part 10: About benefits and pensions (continued)

	You	Your partner
How is it paid?	<input type="text"/>	<input type="text"/>
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Are you (please tick one box):		
- waiting to hear?	<input type="checkbox"/>	<input type="checkbox"/>
- getting it now?	<input type="checkbox"/>	<input type="checkbox"/>
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
How is it paid?	<input type="text"/>	<input type="text"/>

Evidence

To support part 10 of your claim, you must provide the following.

- Evidence of other work**

Such as your most recent award letter or bank statement showing payments received.

We must see **original documents** (not copies), and we need the same evidence for your partner, if you have one.

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
Benefits				

Part 11: About other money coming in

	You	Your partner
Do you receive an occupational pension, work pension or private pension?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
	Go to part 12 .	Go to part 12 .
If 'Yes', how many?	<input type="text"/>	<input type="text"/>
Please tell us about it below. If you have more than one pension, please use part 14 on page 21 to provide all the details we ask for in this part for each one.		
How much do you get?	£ <input type="text"/>	£ <input type="text"/>
How often?	<input type="text"/> every <input type="text"/>	<input type="text"/> every <input type="text"/>
Who are these payments from?	<input type="text"/>	<input type="text"/>
When did you start getting this income?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
When is it likely to go up (if you know)?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>

Part 11: About other money coming in (continued)

Do you, your partner or any children you are claiming for have any money coming in, or expect to have some money coming in (including money that you are owed), that you have not already told us about on the form?

No Go to **part 12**.

Yes See below.

This includes money from a trust fund, training allowances, redundancy payments, payment instead of notice or a holiday, and any cash payments. Also tell us about any money you get from people living in your home as boarders, lodgers or subtenants.

If 'Yes', fill in the table below. You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust.

Who it is for	Where it comes from	How much?	How often?	Date the payment was made or should be made

Evidence

To support part 11 of your claim, you must provide the following.

- Evidence of any pensions**

Such as pension slips from a previous employer or bank statements showing payments received.

- Evidence of any other income (received, expected or owed)**

Written evidence of the income received, expected or owed.

We must see **original documents** (not copies), and we need the same evidence for your partner (if you have one) and any other adults who live in your home.

For office use only

	Document(s) provided	Document(s) requested	Initials	NA
Pension				
Other income				

Part 12: About money, savings and investments

You must answer all the questions listed in this part. You must include all accounts you and your partner have, even if they are overdrawn or have no money in them.

If you have more accounts than there is space for, use part 14 on page 21 to give us all the information we ask for in this part.

Do you or your partner have any of the following?

You

Your partner

Amount Account number

Amount Account number

Bank accounts Yes No

£

£

£

£

£

£

Building society accounts Yes No

£

£

£

£

£

£

Part 12: About money, savings and investments (continued)

		You		Your partner	
		Amount	Account number	Amount	Account number
Post Office accounts	Yes <input type="checkbox"/> No <input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Cash	Yes <input type="checkbox"/> No <input type="checkbox"/>	£ <input type="text"/>		£ <input type="text"/>	
Premium Bonds	Yes <input type="checkbox"/> No <input type="checkbox"/>	£ <input type="text"/>		£ <input type="text"/>	
Unit trusts, ISAs, PEPs, TESSAs or other investments	Yes <input type="checkbox"/> No <input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Income bonds or capital bonds	Yes <input type="checkbox"/> No <input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Money or property held in trust (including trusts set up for your children)	Yes <input type="checkbox"/> No <input type="checkbox"/>	£ <input type="text"/>		£ <input type="text"/>	

				Name of company	Number of shares
Do you or your partner have stocks and shares?	Yes <input type="checkbox"/> No <input type="checkbox"/>			<input type="text"/>	<input type="text"/>
				<input type="text"/>	<input type="text"/>

		Amount	Type
Any other savings or investments	Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>	<input type="text"/>

If 'Yes', please give details.

Do you or your partner have any National Savings Certificates? Yes No If 'Yes', we will write to you about this.

Have you withdrawn any money from a pension fund? Yes No If 'Yes', we will write to you about this.

Do any of your savings or investments include:
 - money from selling a property?
 - money from a charity? Yes No If 'Yes', we will write to you about this.

Apart from your home, do you or your partner own any other property or land in this country or abroad? Yes No If 'Yes', we will write to you about this.
 If you have a mortgage or a loan for this property, still tick 'Yes'.

Have you or your partner ever received a lump-sum payment of State Pension because you have put off claiming State Pension for more than a year? Yes No

We need to know this to make sure we do not count it as part of your savings.

If 'Yes', who received the payment? You Your partner

What was the amount of the payment? You £ Your partner £

Part 12: About money, savings and investments (continued)

Evidence

To support part 12 of your claim, you must provide the following.

Evidence of money, savings and investments

- **Under £6000** - If your and your partner's total joint savings and investments (everything such as bank accounts, ISAs, stocks and shares and so on all added together) are **under £6000**, you do not need to provide extra evidence unless we ask you to.
- **Over £6000** - You must provide proof such as all your bank, building society or Post Office books, full bank statements **which show your name, address, sort code and account number**, or certificates for Premium Bonds, National Savings Certificates, ISAs, stocks, shares and unit trusts. We need to see evidence of any interest or dividends you get on your investments and savings. The evidence must show details for at least the **last two months**.

We must see **original documents** (not copies), and we need the same evidence for your partner (if you have one) and any other adults who live in your home.

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
Over £6000				
Under £6000	Check bank account numbers and balances have been provided and that part 12 is fully completed			

Part 13: Money you pay out

Do you or your partner pay towards any of the following?

	You	Your partner
Supporting a student	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes', how much do you pay?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
Payments to a pension scheme other than through your employer	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes', how much do you pay?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>

Evidence

To support part 13 of your claim, you must provide the following.

- **Evidence of money you pay to support a student**
Full award letter showing how the grant, bursary or loan was worked out for the student.
- **Evidence of payments to a pension scheme other than through your employer**
Such as a bank statement showing payments made or a letter from your pension provider.

We must see **original documents** (not copies), and we need the same evidence for your partner (if you have one)

For office use only				
	Document(s) provided	Document(s) requested	Initials	NA
Student				
Pension				

Part 14: Anything else you need to tell us

Please use the space below to tell us anything else you think we should know about or anything which will change in the future (for example, if you are pregnant, the number of hours you work will increase or someone will be moving in or out).

Part 15: Backdating

We can usually pay your Council Tax Reduction from the Monday after the day we receive your claim. It may be possible to backdate your award for up to:

- three months from the date you ask us if you are of pensionable age (this can usually be awarded automatically.); or
- six months from the date you ask us if you are under pensionable age and there is a good reason why you did not claim earlier.

Date you want Council Tax
Reduction from

 / /

Were your circumstances the same
as on this form from that date?

No

Yes

If you are under pensionable age and would like us to backdate your Council Tax Reduction please tell us why you have not claimed before. If it is due to a medical condition, please provide evidence from your doctor or health professional. Your reasons for not claiming earlier must apply throughout the backdated period and you will need to provide evidence we ask for, if available.

(If you do not fill this in, we will not consider backdating your Council Tax Reduction.)

Part 16: Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, ask them to sign this form as well, as this will help us to process your claim more quickly.

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 or incomplete, you may take action against me. This may include court action.
- **I know** that I must let you know in person, over the phone or in writing about any change in my circumstances which may affect my claim.
- **I agree** that you will use the information to work out if I can get a discount on my Council Tax.

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 by telephone on **0300 100 1800**.

Signature of the person claiming

Date

Your partner's signature

Date

I agree that your Financial Inclusion & Support Service can use my form to work out if I can get any other state benefits.

If this form has been filled in by someone other than the person claiming, please tell us why you are filling in this form for the person claiming before signing the declaration below.

I declare that as far as possible, I have checked with the person claiming that the answers written on this form are correct.

Name of the person who filled in this form

Signature

Relationship to the person claiming

Date

Contact address and phone number

What happens next?

You should now have:

- filled in this claim form; and
- collected any evidence to support your claim.

You should now return the form to your nearest council contact centre.

- When we have your form and all the proof we need, we will assess your claim for Council Tax Reduction.
- We will send you a decision notice. You should read this and make sure you are happy with the outcome of your claim. We will take any Council Tax Reduction we award from your Council Tax bill and you will receive an amended bill. In some cases this may change the instalment amounts. If this applies, this will be shown on your new bill.
- If you are unhappy with the outcome of your claim, you can ask us to look at the decision again or you can appeal against it. Details of how to do this will be printed on the back of your decision notice.

Contact information

By phone: **0300 100 1800** during office hours 8am to 5pm Monday, Tuesday, Wednesday and Friday
8am to 8pm on Thursdays
9am to 12pm on Saturdays

By email: **customeradvice@scotborders.gov.uk**

Online: You can use our online benefit calculator or find out more about Housing Benefit, Local Housing Allowance and Council Tax Reduction at **www.scotborders.gov.uk**.

You can find out the opening times from our website at www.scotborders.gov.uk/contactcentres or by calling 0300 100 1800 and following the appropriate instructions. They are also displayed at each office.