

**COUNCIL TAX
DISREGARDED PERSONS APPLICATION
SEVERE MENTAL IMPAIRMENT**



**Nottingham
City Council
Council Tax**

Admail 3428
Nottingham
NG1 4XX
**Telephone 0115 915 4851
Fax: 0115915 4206**

PLEASE REFER TO THE GUIDANCE NOTES OVERLEAF.

Account Number:

Date of Issue:

SECTION A

Full name and address of applicant (i.e. the person who may be disregarded):

Telephone number:

Date of birth:

Details of any benefits received (Please provide proof - see overleaf):

SECTION B

Authorisation for the Council to seek information from the applicant's doctor

I authorise the council tax office to approach the medical practitioner named below for completion of the certificate given in section C of this document. I agree that this certificate will be returned to the council tax office and that the council will supply me with a copy of this.

SignatureDate

Name and relationship to applicant

Doctor's name and address of surgery or hospital:

SECTION C

For completion by registered medical practitioner

(*Please delete as appropriate)

I certify that in my opinion the applicant named in section A above is / is not* suffering from severe mental impairment as defined in council tax legislation.

Nature of ailment

SignatureDate

Name and address of surgery or hospital

Please provide the date the applicant was diagnosed with severe mental impairment.....

GUIDANCE NOTES

The council tax is comprised of a property element and a personal element. The basic bill assumes that there are two adults resident in the property. However, if there are fewer than two adults the bill will be discounted accordingly. A discount of 25% will be given for single person households and 50% if there are no residents.

When assessing discount certain people are not counted and are said to be "disregarded". Included in this category are people who suffer from severe mental impairment. If a dwelling is wholly occupied by people who are severely mentally impaired then that property will be exempt for the purposes of the council tax.

Council tax legislation defines severe mental impairment as 'a severe impairment of intelligence and social functioning (however caused) which appears to be permanent'.

A person will be disregarded for the purposes of discount if:

- (a) he is severely mentally impaired.
- (b) he has a certificate from a registered medical practitioner to the effect that the applicant has been or is likely to be mentally impaired (as defined above).
- (c) he is in receipt of one of the following benefits:
 - a) an Employment Support Allowance (the first four pages of your entitlement letter is required)
 - b) an attendance allowance
 - c) a severe disablement allowance
 - d) the care component of a disability living allowance payable at the higher or middle rate.
 - e) an increase in the rate of disablement pension where constant attendance is needed.
 - f) a disability working allowance
 - g) an unemployability supplement
 - h) constant attendance allowance or unemployability allowance under articles 14 and 18 respectively of the Personal Injuries (Civilians) Scheme 1983 or articles 14 and 18 respectively of the Naval, Military & Air Force etc (Disablement & Death) Service Pensions Order 1983.
 - i) Income support where the applicable amount includes a disability premium

This form may be completed by either the person to whom the disregard may apply or by a person acting on their behalf.

This application must be submitted with evidence of the benefits to which you are entitled. This may be in the form of a letter of entitlement from the Benefits Agency or a copy of the front cover and first page of your pension or allowance book. **YOUR APPLICATION WILL NOT BE CONSIDERED IF THIS EVIDENCE IS NOT PROVIDED.**

SECTION C

This should be completed by a registered medical practitioner who will normally be the applicant's general practitioner. If you wish you may pass this form directly to your doctor or alternatively the Council will approach the doctor on your behalf.

When complete this form should be returned to the address given below. Should you require any advice or assistance in completing this form please contact:

COUNCIL TAX
ADMAIL 3428
NOTTINGHAM
NG1 4XX

Telephone: (0115) 915 4851

THE COUNCIL TAX OFFICE MUST BE INFORMED IMMEDIATELY SHOULD YOU CEASE TO BE ELIGIBLE FOR THIS DISREGARD.