

Robin Bates
Head of Revenues &
Benefits



Please Reply to:
Revenues & Benefits
The Guildhall
St. Giles Square
Northampton
NN1 1DE

Tel: (0300) 3307000
Minicom: (01604) 838970

Council Tax Disregard–Carers

“The professional carer”

If there are two or more residents in a household who are not entitled to status discount, the discount will not apply and the full council tax charge will be payable.

A person will be disregarded for the purposes of Council Tax if they are;

a) Either-

i) Engaged to provide care and support to a person on behalf of either a Local Authority, the Common Council of the City of London, the Council of the Isles of Scilly, the Crown or a Charitable body.

Or

ii) Employed by the person to whom they are providing care and they were introduced by one of the above.

b) Employed to provide care for at least 24 hours a week, and are paid no more than £44.00 per week.

c) Resident in premises provided either by the relevant body or by the person to whom they are providing care.

I would ask you to complete the application overleaf and return it together with evidence of salary to Revenues & Benefits, The Guildhall, St Giles Square, Northampton, NN1 1DE or scan and e-mail it to revenueservices@northampton.gov.uk

If you do not have access to a printer please contact Revenues & Benefits and we will send you an application.

Section 1

Address of property	
Name of Council Tax bill payer	
Council Tax account reference (if known)	
Names of all persons over 18 years resident in household	
Name of carer and relationship to person being cared for	
Number of hours spent caring each week	
Name of person being cared for	

Section 2

Name of carers employer	
Carer's weekly salary	

Please enclose two monthly, five weekly or three fortnightly wage slips as evidence of salary

Declaration

The information given on this form is correct. I understand that I am obliged to inform Revenues & Benefits within 21 days of any change in circumstances which may affect my entitlement to this discount (e.g. if another adult moves in)

Full name.....

Signed..... Date.....

Tel No & E-mail address*

*this need not be given but may be of assistance when assessing your entitlement to the reduction