

Council Tax Students and Student Nurses Discount & exemption claim form



Revenues and Benefits Service

West Somerset House
Killick Way
Williton
Taunton
TA4 4QA

Telephone 01643 703704

Version 2/2016/

Please read these notes before you fill in the form

Your Council Tax bill assumes there are at least two adults living in your home. If only one adult lives in a property, we can reduce the Council Tax by 25%.

Some people are not counted as living in a property for Council Tax purposes, so even if there is more than one adult living in your home, you could still get a discount.

We do not count people who are **full-time students** or **student nurses** as living in your home for Council Tax purposes.

If your home is only occupied by qualifying full-time students or student nurses, you will not have to pay any Council Tax.

By '**full-time student**', we mean a person whose main home is in the United Kingdom and is studying within the European Union and is:

- On a course which lasts for at least one academic year, takes at least 24 weeks a year and involves at least 21 hours of study a week during term-time; or
- Under the age of 20 and studying for more than three months and at least 12 hours a week for a qualification up to 'A' level or equivalent standard; or
- A student nurse (a person studying for their **first** inclusion on the nurses' part or midwives' part of the Register) studying an academic course at a university (including Project 2000 courses); or
- A foreign language assistant registered with the British Council.
- Undertaking a distance learning course

How to fill in this form

Please fill in the form using **black ink**. If you find it difficult to fill in the form, please telephone us on 01643 703704.

Each student living in your home must provide proof of their course, such as:

- A student certificate issued by their place of study
- For distance learning students, key details of the course (such as duration, hours and syllabus), confirmation of payment (such as an invoice) and the contact details of the course administrator

Students in higher education must supply the **student certificate issued by their place of study**. **We cannot process your claim without this proof.**

When you have filled in the form **make sure you read and sign the declaration in Part B**.

Please return it to: Revenues and Benefits Service, West Somerset House, Killick Way, Williton, Taunton TA4 4QA.

If you would like this form translated into other languages or in Braille, large print, audiotape or CD, please contact us.

Part A. Your household

Address this claim is for

Tell us how many people over the age of 18 live in your home

Include anyone who may be temporarily absent (e.g. is working away, on holiday or in hospital)

Please tell us about anyone who is a full-time student or a student nurse

	First student	Second student
Full name	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Place of study	<input type="text"/>	<input type="text"/>
Course start & end dates	<input type="text" value="/ / to / /"/>	<input type="text" value="/ / to / /"/>
Hours of study each week	<input type="text"/>	<input type="text"/>
	Third student	Fourth student
Full name	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Place of study	<input type="text"/>	<input type="text"/>
Course start & end dates	<input type="text" value="/ / to / /"/>	<input type="text" value="/ / to / /"/>
Hours of study each week	<input type="text"/>	<input type="text"/>

Part B. Declaration

Even if someone has filled in this form for you, you must sign this declaration if you can. Read this declaration carefully before you sign and date it.

- **I declare** the information I have given on this form is correct and complete.
- **I agree** to tell the Council within 21 days of any change in my circumstances that may affect my claim for this discount or my right to this discount.
- **I understand** you could add a penalty of £70 to my Council Tax bill if I fail to tell you of a change affecting my right to this discount within 21 days, or if I give wrong or incomplete information.

Your signature Date

Your full name

If you are not the Council Tax payer for this property, please tell us your full name, address and why you have completed this form

Daytime telephone number or E-mail address

West Somerset Council is under a duty to protect the public funds it administers, and to this end may use the information you provide on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.