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Your Ref/Eich Cyf

Our Ref/Ein Cyf

Pending

Date/Dyddiad

Dear Sir/Madam,

COUNCIL TAX- APPLICATION FOR A PERSON TO BE DISREGARDED FOR DISCOUNT PURPOSES
APPRENTICES

In response to your request, please find overleaf an application form for a person to be disregarded from your household. The form must be completed by or on behalf of the person who is liable to pay Council Tax and certified in Box D by the Employer and endorsed with an official stamp.

The person (regardless of age) can only be disregarded where he/she is:

- (i) learning a trade, business, profession, office employment or vocation
- (ii) for that purpose, undertaking a programme of training leading to a qualification accredited by the Qualifications and Curriculum Authority or the National Assembly of Wales; and
- (iii) employed at a salary or allowance less than that likely to be received if they had achieved the qualifications and, in any case, receiving no more than **£195.00** gross per week

REMINDER- A reduction can only be awarded where ONE person remains liable after all other residents have been disregarded e.g. in a three adult household, two have to qualify to be disregarded before a discount can be awarded.

Please complete the form in BLOCK CAPITALS and in BLACK INK then return to the address shown above.

Yours Faithfully,

W J Carpenter
Council Tax & NNDR Manager

Data Protection Act 1998

The information provided on this form will be treated in accordance with the Data Protection Act 1998. It will be used for the following purposes:

- to establish liability to the Council Tax and eligibility for other forms of statutory relief & allowances in relation to Council Tax.
- by authorised employees AND external bodies such as the Valuation Office Agency and Department for Work and Pensions, for the purpose of management, administration and collection of the Council Tax.
- data provided may be used by the Electoral Registration Officer for Electoral purposes.

We must protect the public funds we handle and so we may use information provided to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds.

You are entitled to a copy of the information the Council holds about you for a fee of £10.00. If you wish to make a request to see your data or if you wish to object to the way in which it is being used, please contact: The Information Unit, Caerphilly County Borough Council, Penallta House, Tredomen Park, Hengoed, CF82 7PG. Telephone number 01443 815588 or e-mail foi@caerphilly.gov.uk.

Correspondence may be in any language or format – *Gallwch ohebu mewn unrhyw iaith neu fformat*
www.caerphilly.gov.uk

PART A

Applicant's name:(must be person liable for Council Tax).....

Address:

..... Post Code:

Number of residents over 18 years of age living in the dwelling:

Names & dates of birth of any resident between ages of 16 years and 18 years:

NAME

DATE OF BIRTH

...../...../.....

...../...../.....

PART B

Full Name of Person to be Disregarded:

Name & Address of Employer:

..... Post Code:

Details of Apprenticeship & College Course Undertaken:

Date Apprenticeship Commences:/...../..... **Date Apprenticeship ends:**/...../.....

Salaries / Wages £ per week/month

(*****Please provide proof of income i.e. your last 4 weekly wage slips or (if paid monthly) your last 2 monthly pay slips*****).

PART C – DECLARATION I declare that the information given in this form is correct to the best of my knowledge and belief and I understand that I must advise the Council immediately if any of the circumstances change. I authorize the Council to undertake any inspection and/or checks to verify the details of this claim. I consent to the information being processed for the purposes of the assessment and collection of council tax by Caerphilly County Borough Council.

Signed: Tel No:

Mr Mrs Miss Ms

Full Name: Date:/...../.....

(Block Capitals)

WARNING – GIVING FALSE INFORMATION MAY RESULT IN PROSECUTION

PART D

EMPLOYER'S CERTIFICATION – I certify that the information given in **Section B** above is correct.

Signed:

Name:

(Block Capitals)

Job Title:

Date:/...../.....

Official Stamp

