Council Tax Support Second Adult Rebate application form







Please note Second Adult Rebate is only available for people of qualifying age for Pension Credit. Second Adult Rebate is help towards your Council Tax where you have other adults living with you who are on a low income. A 'second adult' is a person who lives in your home and is 18 years old or over, but who is not your partner and is not liable to pay Council Tax. Examples include grown up children, relatives or friends who share your home on a non-commercial basis.

Whether or not you qualify for Second Adult Rebate depends on the circumstances of the second adult(s). It does not depend on your own income and capital.

You must provide proof of the following with this application:

- your National Insurance Number
- your identity
- all income for each second adult

If you do not want us to do so, tick this box

• income and interest from savings received by each second adult.

For office use only

Date requested	Date issued Date received		
Part A About you			
1. Title (Mr, Mrs, Ms, other)			
2. Last name			
3. First name(s)			
The address you want to apply for help for			
арріу іоі пеір іоі	Postcode:		
5. Date of birth (dd/mm/yyyy)			
6. National Insurance Number			
7. Daytime phone number			
8. Email address			
We will send your benefit awar Council Tax) to you by email.	rd letters and Council Tax bills (if yo	u are the person liable for	

Part B About other people who live with you							
1. Do you have a partner	? Yes	No					
By partner we mean a person you are married to or a person you live with as if you are married to them, or a civil partner or a person you live with as if you are civil partners.							
If 'Yes', please give their full name							
2. Please give the details asked for below about each person aged 18 or over living with you:							
	Adult 1	Adult 2	Adult 3				
First name							
Last name							
Relationship to you							
Date of birth (dd/mm/yyyy)							

National Insurance Number Do they pay you rent? Hours worked Please list all types of income, for example Gross weekly amounts Gross weekly amounts Gross weekly amounts earnings, pensions and (before deductions) (before deductions) (before deductions) benefits £ Annual interest on £ savings - state NONE if no savings

If there are more than three people aged 18 or over living with you please attach a separate sheet of paper to tell us all the information we ask for on this page.

Part C 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, getting them to sign this form should allow us to process your application more quickly, but they do not have to sign. Please read this declaration carefully before you sign and date it.

- The information I have given on this form is correct and complete as far as I know and believe.
- I understand that if I knowingly give information or evidence that is incorrect, incomplete or false, I may be liable to prosecution or other action.
- I agree that you will use the information I have provided to process my application for Second Adult Rebate. You may check some of the information with other sources as allowed by the law.
- I understand that you may use any information I have provided in connection with this and any claim for social security benefits that I have made or may make. You may give some information to other organisations, such as government departments, local authorities and private-sector companies such as banks and organisations that may lend me money, if the law allows this.
- I know that I must tell the Benefits Service of my Local Authority in writing straight away about any change in my circumstances which might affect my application. Some examples of changes you must tell us about are given below (if you are not sure if a change may affect your application please tell us anyway):
 - If you change address, even to another room in the same house
 - Absence from your home for more than 4 weeks
 - If anyone joins or leaves your household

 If the income of anyone in your household goes up or down

Signature of person applying:		Date:	ı	/	/			
Partner's signature:		Date:		/	/			
The section below must be filled in if someone has filled in the application form for you . This includes an agent, appointee, relative or friend.								
I have filled in this form on behal	f of:							
As they cannot fill in the form because:								
I am (block capitals):								
Relationship to the person apply	ing:							
As far as possible, I have confirm are correct.	ned with the person applying that the ar	nswers I	have writ	ten on	this form			
Signature of the person:		Date:		/	,			

Part D Where to send your completed form

Canterbury City Council residents

Benefit Payments Service Canterbury City Council Offices Military Road Canterbury Kent CT1 1YW

Between 8.30am to 12.30pm drop in, 1.30pm to 5pm appointment only Monday to Friday

www.canterbury.gov.uk

01227 862300

Please see our website for Housing Benefit and Council Tax Support advice and information. Full contact details including our office locations and opening times are also available on our website.

Dover District Council residents

Benefit Payments Service Dover District Council Offices White Cliffs Business Park Dover Kent CT16 3PJ

Between 9am to 12.30pm drop in, 1.30pm to 5pm appointment only Monday to Friday

www.dover.gov.uk

01304 872199

Please see our website for Housing Benefit and Council Tax Support advice and information. Full contact details including our office locations and opening times are also available on our website.

Thanet District Council residents

Benefit Payments Service Thanet District Council Offices PO Box 9 Cecil Street Margate Kent CT9 1XZ

Between 9am to 12.30pm drop in, 1.30pm to 5pm appointment only Monday to Friday

www.thanet.gov.uk

01843 577552

Please see our website for Housing Benefit and Council Tax Support advice and information. Full contact details including our office locations and opening times are also available on our website.