



COUNCIL TAX

Severe Mental Impairment Disregard Application Form

MAKING THE APPLICATION

If there is more than one severely mentally impaired person in the dwelling, a separate form must be completed for each person.

The application form is in two parts. Part 1 should be completed by the severely mentally impaired person or by somebody authorised to act on his/her behalf.

After Part 1 has been completed, the whole form should be forwarded to the severely mentally impaired person's doctor, together with proof of the person's entitlement to one of the listed benefits, for the doctor to complete the certificate in Part 2.

The General Medical Services Committee of the British Medical Association has agreed that this certificate should be issued without charge.

After the doctor has completed the certificate, the whole form, together with proof of benefit entitlement, should be sent to the Local Taxation Section at the above address.

QUALIFYING BENEFITS

For Council Tax purposes, a person is severely mentally impaired if he/she has a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

To qualify for Council Tax disregard, the person must be entitled to one of the benefits listed below, or would have been entitled to one of them if he/she had not already reached State pension age.

- a) Incapacity allowance
- b) Attendance allowance
- c) Severe disablement allowance
- d) Care component of a disability living allowance payable at the middle or higher rate
- e) The daily living component of Personal Independence Payment
- f) Increase in rate of disablement pension (where constant attention needed)
- g) Disability working allowance
- h) Unemployment supplement or allowance

i) Constant attendance allowance under

i. article 14 of the Personal Injuries (Civilians) Scheme 1983 or

ii. article 14 of the Naval Military and Air Forces etc (Disablement and Death) Service Pensions Order 1983 (including that provision as applied, whether with or without modifications, by any other instrument)

j) Income support which includes a disability premium

k) Employment Support Allowance (Support Component)

l) An unemployability allowance under

i. article 18 of the personal Injuries (Civilians) Scheme 1983 or

ii. article 18 of the Naval Military and Air Forces etc (Disablement and Death) Service Pensions Order 1983 (including that provision as applied, whether with or without modifications, by any other instrument)

If the severely mentally impaired person does not receive one of the above benefits, he/she may still qualify if he/she...

- a) has reached pensionable age as defined for the purposes of Parts I to VI of the Social Services Contributions and Benefits Act 1992, and
- b) had he/she not reached pensionable age he/she would have been entitled to one of the benefits listed in paragraph above.

or

- a) is a person whose partner is in receipt of jobseekers allowance and
- b) by virtue of that person's incapacity for work the applicable amount for the purpose of regulation 83 or 84 of the Jobseekers Allowance Regulations 1996 includes a premium which falls to be determined under paragraph (d) or (g) of paragraph 14 (i) of Schedule 1 to those Regulations.

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PART 1 (To be completed by the applicant)

Billing number: (please see the front of the Council Tax bill for severely mentally impaired person's address)	
Applicant's full name:	
Applicant's address:	
Contact telephone number:	
E-mail address:	
Is the applicant the severely mentally impaired person?	Yes * No*

* Please delete as applicable

If No, please give the person's name and address below.

Full name of the severely mentally impaired person:	
Address of the severely mentally impaired person:	

Please give date of birth of the severely mentally impaired person:	
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Please list all people, aged 18 years or over, living in the same dwelling as the severely mentally impaired person:

Full name of resident	Is this person severely mentally impaired?	Has the doctor completed the Part 2 certificate for this person?	Has proof of benefit entitlement been enclosed?
1	Yes* No*	Yes* No*	Yes* No*
2	Yes* No*	Yes* No*	Yes* No*
3	Yes* No*	Yes* No*	Yes* No*
4	Yes* No*	Yes* No*	Yes* No*
5	Yes* No*	Yes* No*	Yes* No*
6	Yes* No*	Yes* No*	Yes* No*

* Please delete as applicable

Part 1 continued overleaf...

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PART 1 (continued)

Doctor's name: (This will usually be the person's GP)	
Address of surgery/hospital:	

The applicant must complete one of the following declarations

I am the severely mentally impaired person. I confirm that I am entitled to one or more of the benefits listed in this form and I enclose proof of entitlement.

I authorise the doctor to complete the certificate in Part 2 of this form, confirming that, for Council Tax purposes, I am severely mentally impaired.

Signed: _____

Date: _____

or

I am authorised to act on behalf of the severely mentally impaired person. I confirm that he/she is entitled to one or more of the benefits listed in this form and I enclose proof of entitlement.

I authorise the doctor to complete the certificate in Part 2 of this form, confirming that the person named in this application is severely mentally impaired.

Full name the person acting for the severely mentally impaired person:	
Relationship to the person:	
Address of the representative:	

Signed: _____

Date: _____

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PART 2 (To be completed by the doctor)

This certificate is for use in deciding whether the person named in this application is severely mentally impaired for Council Tax purposes.

For the purposes of the Local Government Finance Act 1992, a person is severely mentally impaired if he or she has a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

DOCTOR'S CERTIFICATE

I have seen evidence that the person named below is entitled to one of the qualifying benefits and, in my opinion, he or she named is severely mentally impaired for Council Tax purposes, and has been so since the date given.

Full name of the severely mentally impaired person:	
Date from which the above person has been severely mentally impaired:	
Doctor's signature:	
Doctor's full name: (in BLOCK CAPITALS)	
Address of surgery/hospital:	
Doctor's status: (GP etc)	
Date:	

After Part 1 and Part 2 has been completed in full, the whole form should be sent to:

Local Taxation Section
Rushmoor Borough Council
Council Offices
Farnborough Road
Farnborough
Hampshire GU14 7JU

Please remember to include proof of entitlement to one of the qualifying benefits

Privacy Notice – Council Tax

1. Identity of the Data Controller and contact details

Rushmoor Borough Council is the data controller for the personal information you provide. You can contact the Council by phone on 01252 398912, via email to localtax@rushmoor.gov.uk or by writing to us at Council Offices, Farnborough Road, Farnborough GU14 7JU. You can contact the Council's Data Protection Officer at data.protection@rushmoor.gov.uk.

2. What we need your information for and the legal basis for it

We need your personal information to administer and change the details of your council tax account. The law allows us to use your personal information in this way as carrying out responsibilities under the Local Government Finance Act 1992 is one of the Council's public tasks.

3. Use for any other purposes

If we need to use your information for any other purpose, we will normally inform you before using it, unless we believe you know about the new purpose already or there are legal reasons that prevent us from telling you.

4. Will you pass my information to anyone else?

We may share your information with other teams within the Council such as Benefits, Planning, Business rates, Housing, Environmental Health and Corporate Investigations in order to provide our services, carry out our public tasks and to keep our records up to date. If you ask a Councillor for help we may pass information to them and other services to enable them to help you.

We may also pass information about you to third parties where permitted or required by law to do so. This may include other local authorities and government departments or agencies carrying out their public tasks, such as the council's Bailiffs, Magistrates Court, Hampshire County Council, Department of Work and Pensions, HMRC and the Police in carrying out criminal investigations.

5. How we will store and look after your information

Your data will be held electronically and will not be stored in a country outside the UK. All paper records containing your personal information will be held securely in our filing systems and archives.

6. How long we will retain your information

We make sure we do not keep your details for any longer than is necessary and when we no longer have a need to keep your details, we will delete or destroy your details securely. For further information on our policy for retaining personal information, see our retention guidelines.

7. Your rights concerning your information

The General Data Protection Regulation gives you a number of rights concerning your personal information. See the list below. Not all rights apply in every case – it will depend on the legal basis for collecting your information and how we use it.

- The right to be informed
- The right to restrict processing
- The right of access
- The right to data portability
- The right to rectification
- The right to object
- Rights related to automated decision making, including profiling
- The right to erasure

Further details on these rights can be found on our website www.rushmoor.gov.uk/dataprotection

8. Right to complain to the Information Commissioner's Office

If you are not happy with the way the Council is handling your personal information you have the right to lodge a complaint with the Information Commissioner's Office. (ICO).

You will find details of how to do so on the ICO website at <https://ico.org.uk> or by phoning their helpline on 0303 123 1113.

9. Why we need your information and the consequences of not providing it

We need your information to carry out our responsibilities under the Local Government Finance Act 1992. If you are asked to provide us with information and fail to do so, or you knowingly provide inaccurate information, then you are committing an offence under this act.

The penalty for this offence is £70.00. If you continue to fail to provide the information then we may charge you an additional £280.00.