



Date of Issue:

Reference No:

COUNCIL TAX DISCOUNT – PERSONS IN HOSPITAL

Applicant:

This form should be completed by the person responsible for paying the Council Tax (the liable person), but may be done on that person’s behalf.

Please note:

The hospital must be considered as the sole/main residence of the person, i.e. the decision must have been made that the person cannot return to their previous property address. This form must also be passed to the hospital concerned for certification (see Section 7).

Section 1. Application Information – the property that the person in hospital previously resided in:

Full Name(s) of Person(s) Liable:
Property Address:

Section 2. Residents – please list all current adult residents in the property:

Title	Forename(s)	Surname(s)



Section 3. Details of Person in Hospital

Full name of person in Hospital:		
Date admitted to Hospital:	/	/
Date decision made not to return home:	/	/
Number of adults remaining at property address:		

Section 4. Contact Details – if no adults remain in the property address, please supply the name and address of a person that we may contact with regard to Council Tax.

Full Name	Contact Address	Telephone Number

Section 5. Details of Hospital

Name and Address of Hospital:	
Ward Name or Number:	

Section 6. Declaration

I declare the information given above is correct to the best of my knowledge and belief.

Print Name:..... **Signed:**..... **Date:**.....

Please supply a telephone number and/or email address where you can be contacted:

Telephone: Email: <p style="text-align: right;">I would like to receive electronic bills via email <input type="checkbox"/></p>

Section 7. Hospital Certification – to be completed by the hospital concerned

I confirm the person named in Section 3 is or was a patient at the hospital in Section 5 and for the purposes of Council Tax the hospital is or was their sole or main residence.

Name:..... **Signed:**..... **Date:**.....

Organisation:..... **Job Title:**.....

The information on this form is necessary to administer your council tax and fulfil the council's statutory functions, and will not be used for any other purposes.

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We can provide this information in different formats if needed. Please call 01707 357000 and ask for the Council Tax section or email c.tax@welhat.gov.uk