

To Be Returned To:
Perth & Kinross Council
Executive Director (Housing & Community Care)
PO Box 7300
PERTH
PH1 5WH
Telephone No: (01738) 476000
(Mon-Fri 8.45am to 5.00pm)
Email: localtaxes@pkc.gov.uk
Fax No: (01738) 475610



COUNCIL TAX NOTIFICATION OF CHANGE OF CIRCUMSTANCES

EXPLANATORY NOTE

THIS FORM MAY BE USED TO NOTIFY THE COUNCIL OF ANY CHANGES OF CIRCUMSTANCES WHICH MAY AFFECT YOUR COUNCIL TAX BILL.

PLEASE NOTE THAT ANY CHANGES WHICH MAY AFFECT YOUR BILL, SUCH AS NO LONGER BEING ENTITLED TO COUNCIL TAX DISCOUNT, EXEMPTION OR DISABLEMENT REDUCTION SHOULD BE REPORTED WITHIN 21 DAYS OF THE CHANGE

IF YOU REQUIRE ASSISTANCE IN COMPLETING THIS FORM, YOU MAY VISIT **THE RECEPTION AT PULLAR HOUSE, 35 KINNOULL STREET, PERTH OR TELEPHONE (01738) 476000.**

PLEASE RETURN THE COMPLETED FORM TO THE COUNCIL TAX UNIT, PO BOX 7300, PERTH, PH1 5WH.

SECTION A: TO BE COMPLETED IN ALL CASES

Name of Liable person(s):

Address:

Telephone Number:

Account Number:

Property Address (if different from above):

SECTION B: COMPLETE IF NUMBER OF PEOPLE IN HOUSEHOLD HAVE INCREASED

(1) Number of persons over 18 (**including yourself**) now residing in the property:

(2) Name(s) of person(s) who have moved into the property:

(3) Previous address of above named person(s):

(4) Date person(s) moved into the property:

(5) What is your relationship to the above named? (delete as appropriate)

Spouse/ Partner/ Family Member/ Lodger/ Tenant/ Other

If "Other" please specify your relationship:

SECTION C: COMPLETE IF NUMBER OF PEOPLE IN HOUSEHOLD HAVE DECREASED

- (1) Number of person(s) over 18 **(including yourself)** now residing in the property:
- (2) Name(s) of person(s) who have now moved out of the property:
.....
.....
- (3) Date person(s) moved out of the property:
- (4) Reason for moving out of the property (e.g. separated, working away):
.....
- (5) Forwarding address(es) for the above person(s):
.....
.....

SECTION D: OTHER CHANGES WHICH MAY AFFECT EXISTING DISCOUNT ENTITLEMENT

- (1) Name of person who should no longer be disregarded:
- (2) Details of change - above named is no longer (delete as appropriate):
Student/ Student Nurse/ Apprentice/ Youth Training Trainee/ Hospital Patient/
In Detention/ Care Worker/ 18 Years Old/ Other
If "Other" please specify:
.....
- (3) Date of Change:

SECTION E: CHANGES WHICH MAY AFFECT EXISTING PROPERTY EXEMPTION

- (1) The date you moved back into above property:
- (2) How many adults are now residing in the property?.....
- (3) Please specify reason(s) for your absence from the property:
.....
.....
- (4) Provide any other information which may be relevant to Council Tax Exemption:
.....
.....

SECTION F: THIS SECTION MUST BE COMPLETED

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE THAT THE PARTICULARS SHOWN ON THIS FORM ARE ACCURATE.

Signature: **Date:**

DATA PROTECTION

Any information you have provided will be used for the billing and collection of local taxes and the recovery of any unpaid debts due to the Council. Disclosures to third parties will only be made to agents employed by Perth & Kinross Council to recover unpaid debts and to those organisations with a legal right of access, e.g. Inland Revenue. This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided for the prevention and detection of fraud therefore it may also share this information with other bodies for these purposes.

In terms of the Data Protection Act 1998, you are entitled to know what information this Council holds about you, on payment of a fee of £10. Application should be made to the Executive Director (Housing & Community Care), Pullar House, 35 Kinnoull Street, Perth, PH1 5GD.