

# Application for Disabled Person Relief



**General Data Protection Regulation GDPR** - We are asking for the following information in accordance with provisions of the Council Tax (Administration and Enforcement) (Scotland) Regulations 1992 and Data Protection Act 2018. We will use this information to help us determine your liability for and to collect your Council Tax. You can find more information on how your personal information is used for Council Tax on our Privacy Notice which can be found at [www.midlothian.gov.uk/privacy](http://www.midlothian.gov.uk/privacy)

**PLEASE READ THE NOTES OVERLEAF. THIS FORM SHOULD BE COMPLETED IN INK AND BLOCK CAPITALS.**

1. Disabled Persons Full Name

2. Address of property for which relief being claimed

  

3a. Is the disability permanent (Yes/No) commenced

3b. Date disability

3c. Nature of Disability

4a. Is there a room (not a kitchen, bathroom or lavatory) which is predominately used by, and is required to meet the needs of the disabled person?(Yes/No)

If so, please give details of room and the nature of its use

4b. Is there more than one bathroom or kitchen within the property **and** the additional bathroom or kitchen is required to meet the needs of the disabled person?(Yes/No)

4c. Is there sufficient floor space provided to permit the use of a wheelchair that is required to meet the needs of the disabled person and is used within the property?(Yes/No)

4d. If you answered Yes for question 4c please enter the date property was adapted for wheelchair use

**Declaration**

I declare that to the best of my knowledge the information given on this form is true and correct.

I understand that it is an offence to knowingly make a false declaration. The penalties include prosecution for fraud.

I understand that enquiries may be made to verify the information given, and that this may include inspection of the property.

If awarded a disabled person's reduction, I undertake to inform you of any change in circumstances affecting the amount of Council Tax payable.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTES**

1 The person liable to pay Council Tax on the property should sign and date this form.

2 If a disabled person lives in the property then, providing certain conditions are met, a "disabled person's reduction" will be applied. This means that the Council Tax bill is calculated as if the dwelling was in the next lowest valuation band.

3. The property must be the "sole or main residence" of the disabled person. This means that the property must be the disabled person's main or only home.

4 The disabled person must be "substantially and permanently disabled". This can be due to illness, congenital deformity or any other reason. If the disability is not permanent, no reduction will apply.

5 In addition, one or more of the conditions shown in 4a, 4b or 4c overleaf must apply. The term "meeting the needs of the disabled person" means that it is essential, or of major importance to, the disabled person's well being because of the nature or extent of his or her disability. A wheelchair is not required to meet the disabled person's needs if he or she does not use it in the property.

6 Failure to complete and return this form could delay the award of a disabled person's reduction.

7 Please return this form to:

The Director of Health and Social Care  
Midlothian Council  
PO Box 12956  
DALKEITH  
EH22 1YB