

**APPLICATION FOR A COUNCIL TAX DISCOUNT
SEVERELY MENTALLY IMPAIRED**

*Sections A & B, to be completed by the Council Taxpayer;
Section C by relevant doctor*



PRIVATE & CONFIDENTIAL

Our Ref:
Telephone: 01452 396396
Email: revenues@gloucester.gov.uk
Website: www.gloucester.gov.uk
Date:

SECTION A

A Council Taxpayer may receive a discount if someone is resident in the property and is severely mentally impaired.

Qualifying Conditions

1. A certificate must be signed by a doctor confirming the impairment, **and:**
2. The person who is severely mentally impaired must also be entitled to one of the qualifying benefits shown later in this form.

(Please complete the following details in black ink)

1. Full name of the Council Taxpayer (whose name is on the bill)

.....

2. Total number of people over the age of 18 living in the property:

3. Full name of the person who is severely mentally impaired

.....

4. Address of the person who is severely mentally impaired:

.....

SECTION B

Qualifying Benefits

The severely mentally impaired person must be entitled to one of the following benefits. Please tick the appropriate box. ***Please supply documentary evidence with this application***

Universal Credit (where an element for limited capability for work or limited capability for work & work related activity)	
Employment and Support Allowance (ESA)	
Attendance Allowance (AA)	
Severe Disablement Allowance	
Disability Living Allowance (with higher or middle rate care component)	
Daily living component of Personal Independence Payments (PIP)	
An increase in Disablement pension (where constant attendance is needed)	
Disability Working Allowance	
Disability element in Working Tax Credit	
Incapacity Benefit	
Constant Attendance Allowance	
Armed Forces Independence Payment	
Unemployability Supplement or Allowance	
Income Support (which includes disability premium)	
Partner is in receipt of increased Jobseekers Allowance due to S.M.I. person's incapacity to work.	

Application for a Doctor's certificate

I need to obtain a certificate from the severely mentally impaired person's doctor. Please complete the details below to give authorisation:

Doctor's name:

and surgery/hospital
address:

Declaration

To be signed by the Council Taxpayer:

I declare that the information given on this form is correct. I do not object to the council making any necessary enquiries to check this information.

Details of the person
acting on behalf of
the impaired person:

Name:
Address:.....
Signature:.....
Date:.....

SECTION C

To The Doctor

PRN:

Certificate of Severe Mental Impairment in support of an application for a Council Tax discount

Patient's name:

Address:

Please tick the appropriate box.

I certify that in my opinion the patient named above

is

is not

☐☐

suffering from severe mental impairment for the purpose of the Local Government Finance Act 1992.

And this is relevant from the following date

Note: Severe mental impairment is defined in the Regulations as follows:

A person is severely mentally impaired if he has a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

Doctor's signature:

Doctor's full name:

Doctor's surgery/

Hospital address:

Date:

**This certificate is for use only in applying for a discount from the Council Tax.
The form should be returned to the address below within 7 days.**

APPLICATION FOR A COUNCIL TAX DISCOUNT
To be completed by the Council Taxpayer



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Our Ref:
Telephone: 01452 396396
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Website: www.gloucester.gov.uk
Date:

Dear Doctor,
**Discount from Council Tax
For the Severely Mentally Impaired**

A discount has been claimed in respect of the person named in the attached form.

The definition of 'severely mentally impaired' for the purposes of the Local Government Finance Act 1992 is as follows:

A person is severely mentally impaired if he has a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

A discount does not flow from any specific medical diagnosis. It will be your clinical judgement based on the above definition.

If, you are uncertain whether or not an applicant is severely mentally impaired, you should not sign the form. If you do not sign the form you must still return it to the Council Tax section.

The General Medical Services Committee of the BMA has agreed that for the purpose of the Local Government Finance Act 1992, medical certificates should be issued without charge. The certificate has, accordingly, been added to Schedule 9 of the NHS (General Medical Services) Regulations 1992.

Please return the certificate (Section C) to the address below.

Thank you for your help. If you require any further information please contact Revenues & Benefits Services on (01452) 396396.