Council Tax

**Care worker discount**

🕿 0300 300 0300 (Monday to Thursday 8.45am to 4.45pm, Friday 8.45am to 3.55pm)

🖰 council-tax.finit@renfrewshire.gov.uk

🖳 [www.renfrewshire.gov.uk](http://www.renfrewshire.gov.uk)

|  |  |
| --- | --- |
| Name:  Address: | Subject address: |
| Reference: | Date: 08/01/2025 |

|  |
| --- |
| **Part 1 Guidance notes** |
| The Council Tax due on a property may be discounted to reflect the personal circumstances of the adult residents. Such a reduction will apply where less than two adults are resident in the property. For the purpose of the reduction adults who meet the undernoted qualifyingconditions shall be disregarded when counting the number of adults in the house.  If you wish to apply for discount please provide the information requested, sign the declaration, and return the form to the address shown overleaf**.**  **Please note:** Relatives who do not qualify for the carer disregard are people who are either a married or unmarried couple or a parent where the person being cared for is a child under 18. |

|  |
| --- |
| **Part 2 Qualifying conditions** |
| 1. A person who provides care or support on behalf of a unitary authority or charity for at least 24 hours per week, for which they are paid no more than £44 per week, and resides in premises provided by the unitary authority / charity for the better performance of their work. 2. A person who provides care or support to their employer, to whom they were referred by a charity, for at least 24 hours per week, for which they are paid no more than £44 per week, and resides in premises provided for their employer for the better performance of their work. 3. A person who provides care or support, for an average of 35 hours per week to a friend or relative living in the same house, excluding their spouse/partner or a child of theirs aged under 18. The person being cared for must be receiving one of the following benefits:  * Highest rate of attendance allowance * Highest rate of the care component of disability living allowance * Highest rate of disablement pension * An increase in constant attendance allowance |

|  |  |
| --- | --- |
| **For office use only** | |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Part 3 Contact details** | | | |
| Daytime phone number |  | Mobile phone number |  |
| Email address |  | | |

|  |  |
| --- | --- |
| **Part 4 To be completed by the liable person** | |
| I apply for a discount on the basis that the person named below  meets the qualifying conditions noted overleaf under paragraph |  |
| The number of adults usually resident in the property is (this should include the person being cared for) |  |
| * If applying under paragraph 3 then please complete part 5 and disregard part 6. * If applying under paragraphs 1 or 2 then please disregard part 5 and proceed to part 6. | |

|  |  |
| --- | --- |
| **Part 5 The person being cared for** | |
| Name of carer |  |
| Name of person being cared for |  |
| Relationship |  |
| Average no. of hours of care provided per week |  |
| If the person cared for is a child of the care worker, please provide the child’s date of birth |  |
| The state benefit received by the person cared for is: |  |
| **Confirmation of the benefit stated above must be provided for the discount to be considered.** | |

|  |  |
| --- | --- |
| **Part 6 To be completed by the care worker’s employer** | |
| The person named as the carer in part 5  has been a care worker since (dd/mm/yy): |  |
| Average number of hours of care  provided per week |  |
| Gross weekly wage: | STAMP |
| Employers name: |
| Employer’s signature: |
| Position: |
| Date: |

|  |  |
| --- | --- |
| **Part 7 Declaration** | |
| I declare that the information on this form is true and complete and I authorise Renfrewshire Council to verify the details. If discount status no longer applies to this property I undertake to notify Renfrewshire Council within 21 days of this occurring. I understand that failure to provide this information is an offence which may make me liable for an initial fine of £50 and £200 for each subsequent offence. | |
| Data protection: The information provided by you on this form will be used to update council tax records. The Council may check the information provided by you with other information held. The information may need to be shared with other Council departments to check the accuracy of the information; to prevent or detect fraud or crime or to protect public funds. No other disclosures will be made unless the law permits this disclosure. | |
| Signature | Date |

|  |
| --- |
| **Please return all correspondence to:**  Director of Finance & Resources, Council Tax Section, Renfrewshire Council,  Renfrewshire House, Cotton Street, Paisley, PA1 1AD |