COUNCIL TAX DISCOUNT FOR PEOPLE UNDER 20 YEARS AT SCHOOL APPLICATION FORM



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YOUR NAME AND ADDRESS:			Revenue Services County Hall Mold Flintshire CH7 6NA Telephone Number: (01352) 704848 If you need to contact us, please quote your:- Account Reference Number							
Peopl	e who ai	e under 20 and:-								
	 ✓ are still at school, OR ✓ have just left school, ✓ AND Child Benefit is still in payment 									
may not be treated as a resident for the purposes of Council Tax.										
This means that, dependent on the number of other residents in your household, you may be entitled to a discount on the amount of Council Tax that you pay.										
For this discount to apply you must send a photocopy of the notification of payment of Child Benefit with this form.										
Please complete this form in BLACK INK										
		y help or advice to complete this form, you ckley, Flint, Connahs Quay or Holywell (ope								
A		Your Household Details								
Please tell us the names of all the people aged 18 years or over, who normally live in the property.										
Title		First name	Surname							
В		DETAILS OF SCHOOL								
2. F	Please tell us the full name of the person who is still at school, or has recently left school									
Title		First Name	Surname							

3. Name and address of School

	Name of School	Address of School								
			<u> </u>							
4.	Please tell us the date the school studies end									
5.	Is Child Benefit still being received for the person named above									
If 'Yes' please can you send a photocopy of the notification of payment of Child Benefit. For security reasons, you should not send the original document to the Council.										
С	DECLARATION									
The information I have given on this form is correct. If I qualify for a School Discount, I agree to tell Flintshire County Council if the person named in this application leaves the household to undertake a further educational course, or if someone else over the age of 18 moves in.										
Your 9	Signature	Date:								
Your Full Name (Please print)										
Your (Contact Telephone Number									
Would you like to receive your council tax bill by e-mail? Yes* No										
*E-mail address:										

REMEMBER TO ENCLOSE YOUR PHOTOCOPY OF THE NOTIFICATION OF PAYMENT OF CHILD BENEFIT WITH THIS FORM.

Data Protection

I agree that any personal information I provide may be held or processed by the Council for those purposes contained in the Council's current notification to the Information Commissioner and in accordance with the provisions of the Data Protection Act 1998. I also agree that any personal information I provide may be shared with third parties as and when necessary in order to verify the information, for the prevention or detection of crime and/or for the purposes of discharging any statutory or administrative function or as required by law.