## Application for Council Tax Reduction For Universal Credit Claimants

| Your personal details                            |  |
|--|--|
| Name   |  |
|  |  |
| Date of Birth                                    | National Insurance Number                    |
| D D M M Y Y Y                                    |  |
| Address  |  |
| radicas  |  |
|  |  |
|  |  |
|  |  |
| Claim Reference (if known)                       |  |
|  |  |
| Home phone number                                |  |
| Mark the control of                              |  |
| Mobile number                                    |  |
| Email  |  |
| Email  |  |
|  |  |
| Your partner's details (if applicable)           |  |
| Name   |  |
|  |  |
| Date of Birth                                    | National Insurance Number                    |
|  |  |
|  |  |
| Other Household Members Please list e            | veryone who normally lives with you          |
| Name person 1                                    |  |
|  |  |
| Date of Birth                                    | National Insurance Number                    |
|  |  |
|  |  |
| Income/ Amount (£)  Income Source  Income Source | ce (eg wages) Frequency (eg weekly, monthly) |
|  |  |



| Name person 2   |  |
|---|--|
| Date of Birth  National Insurance Number  MM Y Y Y Y  Income/ Amount (£)  Income Source (eg wages)  Frequency (eg weekly, monthly)  |  |
| Name person 3   |  |
| Date of Birth  National Insurance Number  MM Y Y Y Y  Income/ Amount (£)  Income Source (eg wages)  Frequency (eg weekly, monthly)  |  |
| Name person 4   |  |
| Date of Birth  National Insurance Number  Mincome/ Amount (£)  Income Source (eg wages)  Frequency (eg weekly, monthly)   |  |
| Evidence of the income of other adults living in your home is needed to support your application  |  |
| DECLARATION   |  |
| Please read this declaration carefully before you sign and date it.   |  |
| <ul> <li>I wish to apply for Council Tax Reduction (CTR)</li> <li>I agree to the information I provided to the Department for Work and Pensions for my Universal Credit claim to be used to assess my CTR application.</li> <li>I declare that the information I have given on this form is correct and complete</li> </ul> |  |
| <ul> <li>as far as I know and believe.</li> <li>I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.</li> </ul>   |  |
| • <i>I know</i> that I must let you know in writing straight away about any changes in my circumstances.  |  |
| <ul> <li>I understand that information I have provided in connection with this and/or any other application to CTR that I have made or may make, may be given to The Scottish Government and to other organisations, if the law allows this.</li> </ul>   |  |
| Signature of Applicant  |  |
|   |  |
|   |  |

D D M M Y Y

Date

