

COUNCIL TAX DISCOUNT APPLICATION FORM – MEMBERS OF RELIGIOUS COMMUNITIES

Council Tax Account Reference Number	
Full Name	
Address	
Occupation of community	
Do you receive and income of any kind?	YES / NO
Do you hold any money as capital? (including interest in any property)	YES / NO
If YES , please give details	

DECLARATION

I declare that the information given on this form is complete and accurate to the best of my knowledge. **REMEMBER, if you give false information you may be prosecuted.**

In order to protect public funds, the Council may use the information you have provided on this form to prevent and detect fraud. The Council may also share this information, for the same purposes, with other organisations which handle public funds.

Information will only be used by Horsham District Council and its employees in accordance with the Data Protection Act 1998. The Council will not supply information to any other organisation or individual except to the extent permitted by the Data Protection Act and which is required or permitted by law in carrying out any of its proper functions.

Full Name (BLOCK CAPITALS)	
Signature	
Date	
Telephone	