



COUNCIL TAX EXEMPTION APPLICATION FORM - ANNEXE

Council Tax Account Reference Number	
Address of Principal Property	
Address of Annexe	
Name(s) of the occupier(s) of the	
Principal Property	
Name(s) of the occupier(s) of the Annexe	
(the dependent relative)	
Relationship of the dependent relative	
Date of Occupation	
Nature of dependence (please circle	
appropriately)	(a) Aged 65 years or over
	(b) Severely Mentally Impaired
	(c) Substantially or permanently disabled
If (a) has been circled, please give the dependent	
relative's date(s) of birth	
If (b) or (c) have been circled please give details	
of the impairment or disability, and provide	
supporting documentary evidence such as a	
copy of his/her benefit book or letter of	
entitlement to benefit from the DWP	
Does the annexe have its own electricity and	
water bills or are they shared with the	
principal property?	

DECLARATION

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

Please return form to: Horsham Revenues and Benefits, PO Box 10745, Nottingham, NG6 6ED

Full Name (BLOCK CAPITALS)	
Signature	
Date	
Telephone	

Information will only be used by Horsham District Council and its employees in accordance with Data Protection Act 1998. Horsham District 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.