



**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?	



**Horsham
District
Council**

Horsham Revenues and Benefits
PO Box 5327
Central Milton Keynes
MK9 3ZA

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.**

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.