



**Horsham
District
Council**

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

COUNCIL TAX DISCOUNT APPLICATION FORM YOUTH TRAINING TRAINEE

Please return this form to the PO address shown above

A person is a Youth Training Trainee if he/she is under the age of 25 and is undertaking a training course in accordance with section 2 of the Employment and Training Act 1973 or section 2 of the Enterprise and New Towns (Scotland) Act 1990 and, in either case, is an approved training scheme for the purposes of section 28 of the Social Security Contributions and Benefits Act 1992.

Please complete the application form overleaf (in black ink, using block capitals) with the details of the person undertaking the Youth Training course.

You should also enclose a letter of confirmation or Certificate of Employment as a Youth Training Trainee.

Should the circumstances of the Youth Training Trainee or the number of adult persons in the household change after you have completed the form, you must notify the Council Tax office within 21 days of the change. In the meantime, if you have any queries, please do not hesitate to contact us.

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.



SECTION 1 – DETAILS OF YOUTH TRAINING SCHEME

First Name	
Last Name	
Date of Birth	
Address	

SECTION 2 – DETAILS OF YOUTH TRAINING

Employer's name	
Employer's Address	
Employer's telephone number	
Date YT course started	
Date YT course due to end	

Please do not forget to enclose a letter of confirmation or certificate of employment as a youth training trainee

SECTION 3 – HOUSEHOLD DETAILS

Number of people aged 18 or over who have the property to which this form is addressed as their main home (including any people to be disregarded) (please state their names and DOB)	
Number of people aged 16 or 17 who have the property to which this form is addressed as their main home (please state their names and DOB)	



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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.

Full Name (BLOCK CAPITALS)	
Signature	
Date	
Telephone	

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