

# COUNCIL TAX EXEMPTION APPLICATION FORM – ANNEXE

**Council Tax Account Reference Number:** .....

1. Address of Principal Property: .....
2. Address of Annexe: .....
3. Name(s) of the occupier(s) of the Principal Property: .....  
.....
4. Name(s) of the occupier(s) of the Annexe (the dependant relative): .....  
.....
5. Relationship of dependant relative(s): .....
6. Nature of dependence. Please tick the appropriate box:  
(a) Aged 65 years or over   
(b) Severely Mentally Impaired   
(c) Substantially or permanently disabled
7. If box (a) has been ticked please give the dependant relative's date(s) of birth: .....  
.....
8. If boxes (b) or (c) have been ticked 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: .....  
.....
9. Does the annexe have its own electricity and water bills or are they shared with the principal property? Own  Shared
10. Please give the number of adults who have been resident in the annexe since .....

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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.**

Signature: ..... Date: ..... Tel. No.: .....

Full Name (BLOCK CAPITALS) .....

**Please note:** Information will only be kept in accordance with the General Data Protection Regulation and the Data Protection Act 2018. Mid Sussex District Council will not supply information to any other organisation or individual except to the extent permitted by law in carrying out any of its functions.

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Please send form to: Revenues and Benefits Services, PO Box 10607, Nottingham, NG6 6DU