

Application for a Member of a Religious Community Discount

Please complete this form, sign the declaration at the end and return the form to: The Council Tax Service, PO Box 1733, Slough SL1 1FS

About the person who is responsible for paying the Council Tax		
Their full name:		
Their address:		
Daytime phone number:		
Email address:		
Give the Council Tax reference number (it's on the Council Tax bill):		
How many people aged 18 normally live at this add	Iress:	
Give their full names:		
About the religious community		
Name of the religious community:		
The address of the community (if it is different from where the member lives):		
Briefly what are the aims of the community?		
Email address:		

About the community member		
Give the name of the member of the religious community:		
Does he/she have any income?	Yes 🗌	No 🗌
If Yes, is it a pension from a former employer?	Yes 🗌	No 🗌
Does he/she have any capital?	Yes 🗌	No 🗌
DECLARATION		
I declare that the details stated in this application knowledge and belief.	on are true	and accurate to the best of my
Name (block capitals)		
Signature		Date
This authority is under a duty to protect funds information you have provided on this form fo also share this information with other bodies funds for these purposes. <u>Find information ab</u>	r the preve responsible	ention and detection of fraud. It may e for auditing or administering public