



## Revenues and Benefits Service

PO Box 34750  
London, N7 9WF

**T** 020 7527 2633

**F** 020 7527 2168

**W** [www.islington.gov.uk](http://www.islington.gov.uk)

Minicom: 020 7527 1900

**Automated Telephone Payments:**

**020 7527 8000**

Please reply to: Council Tax

Date:

Our Ref:

Your Ref:

Dear Sir/Madam

### **The Council Tax Discount - severe mental impairment.**

Thank you for letting us know that you share your home with a person who may be considered to be mentally impaired, and that you wish to claim a discount (reduction) on your council tax account.

Before I can give you the 25% discount I need to see the following:

- 1) A copy of the attached statement signed by the person's doctor to confirm the severe mental impairment.
- 2) A letter from the Benefits Agency confirming which of the following qualifying benefits the person with severe mental impairment is receiving:

**Short-term or long- term Incapacity Benefit.**

**Severe Disablement Allowance (SDA).**

**Care component of a Disability Living Allowance payable at the highest rate or middle rate.**

**Employment and Support Allowance.**

**Attendance Allowance (AA).**

**Constant Attendance Allowance payable under the industrial injuries or war pension schemes.**

**An increase in disablement pension for constant attendance.**

**Income Support Disability Premium awarded on the grounds of incapacity for work.**

**Disability element of working tax credit.**

**Unemployability allowance payable under industrial injuries or war pension schemes.**

**Unemployability supplement for remaining claimants.**

- 3) I must know the exact date the pension or allowance was first granted.

Please return the form **within 14 days**. You can contact us using the details given above if you have any questions about this letter.

Yours faithfully



**John Allen**  
**Head of Revenues**  
**Islington Council**

*“Direct Debit the easy way to pay, just call 020 7527 2633”*

**If you would like this document in large print or Braille, audiotape and or in another language, please telephone Contact Islington on 020 7527 2000.**



What is the easiest way to manage your council accounts online?  
My eAccount is the answer, just visit [www.islington.gov.uk/myeaccount](http://www.islington.gov.uk/myeaccount)



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**To be presented  
to the doctor**

Dear Doctor

### **Council Tax: severe mental Impairment**

The person named on the attached form wishes to claim the exemption described above. You will no doubt be aware that in order to establish this, a registered Medical Practitioner must confirm and sign the statement below.

If you agree that this person falls within the statement's definition, perhaps you would sign it and return it. If you do not agree, it would be helpful if you would let me know.

Thank you for your help in this matter.

Yours faithfully

**John Allen  
Head of Revenues  
Islington Council**

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**Council tax account reference:**

\_\_\_\_\_  
**Name and Address of Person:**

\_\_\_\_\_  
In my opinion, the above named person is severely mentally impaired and has been since

\_\_\_\_\_ (Please provide date),

i.e.: he/she has a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

**Signed** \_\_\_\_\_

**Surgery/hospital** \_\_\_\_\_

**Date** \_\_\_\_\_

Doctor's stamp below please:

**Fair Processing Notice**

Any personal information you give us is held securely and will be used only for council purposes. Information that was collected for one purpose may be used for another council purpose, unless there are legal restrictions preventing this. Islington may share this information where necessary with other organisations, including (but not limited to) where it is appropriate to protect public funds and/or prevent fraud in line with the National Fraud Initiative guidelines. Please see [www.islington.gov.uk/dataprotection](http://www.islington.gov.uk/dataprotection) for more information:

