Council Tax

Application for Person to be Disregarded for Discount Purposes - Person in Detention



PART A

PAKI A	•	
Applicant's Name (must be person liable for Council Tax	x)	
Address		
Relationship to Person in Detention		
How many people (including yourself) aged 18 or ov	er live at this address	
PART B		
Home Address		
Name and Address of Places of Detention		
Date of Birth	Prison Service Number	
Date Taken into Detention	Anticipated Date of Release	
PART C		
	n this application is correct and agree that the Council may on. I agree to inform the Council immediately of any changes buncil Tax.	
WARNING - GIVING FALSE INFORMATION MAY	result in prosecution	
Signed	Date	
Please return this form to: Head of Finance, Information Station, Old Station Building, Queensway, Newport NP20 4AX . If you require assistance please telephone: (01633) 656656		
OFFICE USE ONLY		
Ref	Date Granted/Refused	
Signed	Note	

PART A

Name	e	ging Authority		
	of Birth Priso			
Previo	ous Address		-	
	Post Code			
PAR'I	T'B			
I	Is/Was this person held at your establishment?		YES/NO	
2	Specify total period or periods of detention since ()	Years/Months/Days	
3	Is/Was the whole period of detention accounted for solely by non-payment of Council Tax or a fine?		YES*/NO	
	* If Yes, go straight to Part C			
4	Date released from custody			
	or Current expected date of release on remission			
	and if applicable the earliest date on which the above named might be released	I on parole		
5	Any other information (include new address if known)	1 On parote		
PART C				
Form completed by (BLOCK CAPITALS)				
Prison Service Establishment (BLOCK CAPITALS)				
Prison Stamp				
Date				