COUNCIL TAX

Guidance Notes: Status Discount for a Youth Trainee

The Local Government Finance Act 1992 and the Discount Order 1992, Schedule 1, Part IV, define that a person will be disregarded for the purpose of determining entitlement to discount if he or she is;

a) **under the age of 25** and

b) **is undertaking training**
   
   (i) pursuant to arrangements made under section 2 of the Employment and Training Act 1973 or section 2 of the Enterprise and New Towns (Scotland) Act 1990 and
   
   (ii) which is funded by the Learning Skills Council for England.

Note: You must notify Sefton Council immediately, if there are any changes in circumstances that may affect a discount.

**WARNING:** If you knowingly sign the declaration overleaf and it is found to be false, you could be subject to prosecution.
COUNCIL TAX STATUS DISCOUNT APPLICATION - YOUTH TRAINEE

Only complete this form once you have read the Guidance Notes. Part 1 and 2 of the form should be filled in by the person who is liable for payment of the Council Tax, Part 3 is to be filled in by the Youth Trainee’s Training Supplier. Please don’t send the form back to us until all parts are complete.

**Part 1**

I wish to apply for a discount with effect from:

Number of persons aged eighteen and over who are resident in the dwelling:

Number of persons aged eighteen and over who you wish to claim a discount for:

**Part 2**

Name of Youth Trainee: (Block letters) ___________________________________________________________________

Date of Birth: ___________________________________________________________________

Address of Dwelling: ___________________________________________________________________
_________________________________________________________________________________

Postcode: ________

Telephone Number: ___________________________________________________________________

DECLARATION: I declare that the details stated above are true and accurate to the best of my knowledge and belief.

Signature of Applicant: ___________________________________________________________________
Dated: __________

Name: (Block letters) ___________________________________________________________________
Account No: _______________

**Part 3** The Training Supplier for the named Youth Trainee should complete the following:

I certify that the person named above is a Youth Trainee, as defined in the Guidance Notes, in accordance with the Local Government Finance Act 1992.

Date Youth Training started: ________________ Anticipated end date: ________________

Signed: ___________________________________________________________________
Dated: __________

Name: (Block letters) ___________________________________________________________________

Office Address: ___________________________________________________________________
_________________________________________________________________________________

Postcode: ________

Office Telephone Number: ___________________________________________________________________