

**Revenue & Support Services Council Tax Team**

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 Tel 01508 533633 Fax 01508 533616

[revenues@s-norfolk.gov.uk](mailto:revenues@s-norfolk.gov.uk)



**Name & Correspondence Address**

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**Council Tax Exemption Application**

<p><b>Property Address</b></p> <p>.....</p> <p>.....</p> <p>.....</p>
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<p><b>Account Number</b> <i>(if known)</i></p>
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Please tick below which class of exemption you wish to apply for

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>	<b>G</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>K</b>	<b>L</b>	<b>M</b>	<b>N</b>	<b>O</b>	<b>P</b>	<b>R</b>	<b>S</b>	<b>T</b>	<b>U</b>	<b>V</b>	<b>W</b>
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For your application to be considered, please detail below the grounds of your application, and enclose any supporting evidence to support your application

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**I declare that the information I have given is correct to the best of my knowledge.**

<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>
Please provide contact Telephone numbers and E-mail address		
Daytime	Evening	Mobile
E-mail address		

**PLEASE NOTE:** The information supplied on this form will be used for the purpose(s) for which you have supplied it, and, where appropriate, will also be used by the Council in carrying out its various functions effectively. It will not be shared with other organisations unless we are required to do so by law. However the Council will always use or share information for the prevention or detection of crime, or the apprehension or prosecution of offenders

**YOU MUST TELL THE COUNCIL TAX SECTION OF ALL CHANGES WHICH MAY AFFECT YOUR RIGHT TO AN EXEMPTION.**