

COUNCIL TAX DISCOUNT

SEVERE MENTAL IMPAIRMENT

DOCTOR'S CERTIFICATE

This form needs to be completed and signed by the Doctor of the person for whom an application is made for Council Tax discount based on Severe Mental Impairment.

Full name of the mentally impaired person

Address

Please include any flat or room location

Name of surgery / hospital

Address

Local Government Finance Act (1992) states that a person is severely mentally impaired if they have a severe impairment of intelligence and social functioning (however caused) which appears to be permanent.

I confirm that in my opinion the above named person suffers from:

- Severe impairment of intelligence
- Severe impairment of social functioning
- Both the above conditions appear to be permanent

YES	☐	NO	☐
YES	☐	NO	☐
YES	☐	NO	☐

To my knowledge all three of the above conditions have existed since

Doctor's full name

Doctor's signature

Date

Doctor's stamp

Please scan and e-mail this form to revenues.division@dundee.gov.uk or you can supply it online using our website on www.dundee.gov.uk/evidence

Alternatively please post this form to Dundee City Council, Council Tax, 50 North Lindsay Street, Dundee, DD1 1NN.