

High hedge complaints Discount application form

Name		National Insurance N^o	
Address		Phone	
Email		Mobile	
		Council tax band	

Benefits you receive
(tick boxes as applicable)

	You	Your partner
Income Support	<input type="checkbox"/>	<input type="checkbox"/>
Jobseeker's Allowance (Income-based)	<input type="checkbox"/>	<input type="checkbox"/>
Universal Credit	<input type="checkbox"/>	<input type="checkbox"/>
Employment & Support Allowance (Income-related)	<input type="checkbox"/>	<input type="checkbox"/>
Guaranteed Pension Credit	<input type="checkbox"/>	<input type="checkbox"/>
Working Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>
Council Tax Support	<input type="checkbox"/>	<input type="checkbox"/>

DECLARATION (to be signed by the applicant)

I am eligible to claim this discount. I believe that the details I have provided are correct.

Signature:

Date:

Print Name:

AUTHORISATION (to be signed by the person(s) receiving benefit(s))

I authorise South Staffordshire Council to confirm that I receive the benefit(s) indicated above. The Council may use my information for its business purposes.

Signature:

Date:

Print Name: