

Council Tax notification that a person has passed away

Your name:

Your address:

Council Tax Account Number of the person that has passed away (if known):

Thank you for contacting us at this difficult time. Please could you answer the following questions so that I can ensure that our records are updated and accurate.

1. What is the name of the person who passed away?

2. What is the address of the person who passed away?

3. What is the date that the person passed away?

4. Is the property indicated in 2 above, unoccupied? Yes/No
(If no, please go to question 5 otherwise please go to question 6).

5. Please give the full names and status of those people over the age of 18 that live at the property address indicated in 2 above.

Name of occupier	Status eg tenant / owner / lodger

6. If the person that passed away rented their home, please give the name and address of the landlord?

Name:	
Address:	

7. Please tell us what date the tenancy ended?

8) If the property is empty and unfurnished please tell us the date that the furniture was removed?

9. If the person that passed away owned their home, please give the name and address of the person or solicitors dealing with the administration of the estate.

Name:	
Address:	
Telephone number and/or email address	

DECLARATION

By signing this form I declare the following:

The information on this form is correct and complete to the best of my knowledge and belief. I understand that it is a criminal offence to make a statement or representation that I know to be incorrect or to provide documentation that is false or fail to disclose information to the authority where the law requires it, after this form is complete. If I do so I may be prosecuted. If a discount or exemption no longer applies I will notify the council within 21 days of this occurring.

This authority is required by law to protect the public funds it administers. We may share information you provide with other bodies responsible for auditing, or administering public funds, or where undertaking a public function, in order to prevent and detect fraud. We may also share information you provide to a Specified Anti-Fraud Organisation (SAFO) for the purposes of preventing and detecting fraud. For further details on this please visit www.harlow.gov.uk/privacy and select Corporate Anti-Fraud Team.

Signature:	
Full name:	
Date:	

It would help if you could supply daytime contact details in case we need further information.

Email address:	
Telephone number:	
Contact address:	

To submit your application you will need to:

1. Scan the completed form and relevant documents using either a scanner or taking a picture of it using your mobile phone.

2. Send the scanned/pictured image to your computer eg by email or text
3. Answer all the questions and then attach the image at www.harrow.gov.uk/evidenceform